

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004219

FILED  
May 14, 2004  
Secretary of State

**Entity Name:** FAIR DEBT MANAGEMENT SERVICES, INC.

**Current Principal Place of Business:**

3 MOTT PLACE  
DIX HILLS, NY 11746

**New Principal Place of Business:**

**Current Mailing Address:**

3 MOTT PLACE  
DIX HILLS, NY 11746

**New Mailing Address:**

425 BROAD HOLLOW ROAD  
SUITE 115  
MELVILLE, NY 11747 US

**FEI Number:** 11-3612901

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

VOGT, THOMAS  
11155 BLACK WILLOW LANE  
WELLINGTON, FL 33414 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PCD ( ) Delete  
Name: ROCCO, ROBERT D  
Address: 3 MOTT PLACE  
City-St-Zip: DIX HILLS, NY

Title: S ( ) Delete  
Name: VOGT, THOMAS  
Address: 11155 BLACK WILLOW LANE  
City-St-Zip: WELLINGTON, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PCD (X) Change ( ) Addition  
Name: ROCCO, ROBERT D  
Address: 3 MOTT PLACE  
City-St-Zip: DIX HILLS, NY 11746 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT DAVID ROCCO

PRES

05/14/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date