2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

F01000005683 **DOCUMENT#**

1. Entity Name

FIRST SOURCE FINANCIAL USA, INC.



FILED Jan 13, 2003 8:00 am Secretary of State

01-13-2003 90425 014 ***150.00

Principal Place of Business 2920 NORTH GREEN VALLEY PKWY STE. 312 HENDERSON NV 89014		Mailing Address 2920 NORTH GREEN VALLEY PKWY STE, 312 HENDERSON NV 89014			33 121 (1 0 11 40 111 8 211	AL BORILL BOLKA BORRAL RELITA	ALIEN INNE DINE NAC	
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			1	Olifor		
City & State		City & State		CHECK HERE IF MAKING CH			GES Applied For	
Zip	Country	Zip	Country		5. Certificate of S	38-0386055		Not Applicable Additional
	6. Name and Address of Current F	Registered Agent			7. Name and Add		Fee Red	
526 E. P.	RVICES, INC. ARK AVENUE ASSEE FL 32301		Stre		P.O. Box Number is t			
9 Thombou	e named entity submits this statement for titions of registered agent.		City				FL Zip (Code
SIGNATURE F Afte		title if applicable. (NOT	E: Registered Agent si		when reinstating) 9. Election	Campaign Finar	DATE	5.00 May Be
10.	OFFICERS AND DI		11,	 -			/10	
NAME STREET ADDRESS CITY-ST-ZIP	PCD GIULIANO, JOSEPH N 2920 NORTH GREEN VALLEY PARI HENDERSON NV 89014	☐ Delete KWAY, STE. 312	TITLE NAME STREET ADDRES CITY-ST-ZIP	ss	ADDITIONS/CHAP	NGES TO OFFIC	EHS AND DIRECTION CHAIN	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST GIULIANO, JOSEPH N 2920 NORTH GREEN VALLEY PARH HENDERSON NV 89014	□ Delete KWAY, STE. 312	NAME STREET ADDRES CITY-ST-ZIP	s			☐ Chang	e 🔲 Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	rtify that the information available it is	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition

12 Thereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or director changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: