

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 21, 2005 8:00 am**  
**Secretary of State**

01-21-2005 90089 010 \*\*\*150.00

**DOCUMENT # F01000006373**

1. Entity Name  
**ENCORE CREDIT CORP.**



Principal Place of Business  
**1833 ALTON PARKWAY  
IRVINE, CA 92606 US**

Mailing Address  
**1833 ALTON PARKWAY  
IRVINE, CA 92606 US**

**50005406**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01052005 Chg-P CR2E034 (10/03)

4. FEI Number  
**33-0986192**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NRAI SERVICES, INC.  
526 E. PARK AVE.  
TALLAHASSEE, FL 32301**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**CEO  
HOLDER, STEVEN G CHAIRMN  
1833 ALTON PARKWAY  
IRVINE, CA 92606** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**Chairman/Co-CEO** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**PRES  
ASGHAR, SHAHID S DIR  
1833 ALTON PARKWAY  
IRVINE, CA 92606** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**Co-CEO/President/Director** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**SEC  
DAURIO, JON R DIR  
1833 ALTON PARKWAY  
IRVINE, CA 92606** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**CFO  
KONTOULIS, JOHN DIR  
1833 ALTON PARKWAY  
IRVINE, CA 92606** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**EVP/Director** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**EVP  
SZPYTEK, STEVEN DIR  
1833 ALTON PARKWAY  
IRVINE, CA 92606** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**DIR  
BRAZIL, JAMES R DIR  
1833 ALTON PARKWAY  
IRVINE, CA 92606** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

12. I hereby 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

*Alanna Darling*

Alanna Darling

1/12/05

(949) 856-4848

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

# ATTACHMENT

ENCORE CREDIT CORP.

50005406  
# F01000006373

## 2005 PROFIT CORPORATION ANNUAL REPORT FLORIDA

### 11. ADDITIONS TO OFFICERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP John Kohler 1833 Alton Parkway Irvine, CA 92606	<input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP/CFO Roque A. Santi 1833 Alton Parkway Irvine, CA 92606	<input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Alanna Darling 1833 Alton Parkway Irvine, CA 92606	<input checked="" type="checkbox"/> Addition

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

# ATTACHMENT

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<b>DOCUMENT # F01000006373</b> 1. Entity Name <b>ENCORE CREDIT CORP.</b>					
Principal Place of Business <b>1833 ALTON PARKWAY IRVINE, CA 92606 US</b>			Mailing Address <b>1833 ALTON PARKWAY IRVINE, CA 92606 US</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>33-0986192</b>	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>NRAI SERVICES, INC. 526 E. PARK AVE. TALLAHASSEE, FL 32301</b>			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ <b>FL</b> Zip Code _____		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEO HOLDER, STEVEN G CHAIRMAN 1833 ALTON PARKWAY IRVINE, CA 92606 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Chairman/Co-CEO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRES ASGHAR, SHAHID S DIR 1833 ALTON PARKWAY IRVINE, CA 92606 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	Co-CEO/President/Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SEC DAURIO, JON R DIR 1833 ALTON PARKWAY IRVINE, CA 92606 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CFO KONTOULIS, JOHN DIR 1833 ALTON PARKWAY IRVINE, CA 92606 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVP/Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	EVP SZPYTEK, STEVEN DIR 1833 ALTON PARKWAY IRVINE, CA 92606 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIR BRAZIL, JAMES R DIR 1833 ALTON PARKWAY IRVINE, CA 92606 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Alanna Darling</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: <u>1/12/05</u>		Daytime Phone #: <u>(949) 856-4840</u>

# ATTACHMENT

ENCORE CREDIT CORP.

## 2005 PROFIT CORPORATION ANNUAL REPORT FLORIDA

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### 11. ADDITIONS TO OFFICERS

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TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP/CFO Roque A. Santi 1833 Alton Parkway Irvine, CA 92606	<input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Alanna Darling 1833 Alton Parkway Irvine, CA 92606	<input checked="" type="checkbox"/> Addition