2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2003 8:00 am
Secretary of State
03-26-2003 90156 032 ***150.00

DOCUMENT # F02000002137

1. Entity Name
ABSOLUTE VALUE CAPITAL MANAGEMENT, INC.

Principal Place of Business	Mailing Address
209 NORTH FORT LAUDERDALE BEACH BLVD.	209 NORTH FORT LAUDERDALE BEACH BLVD.
PENTHOUSE F	PENTHOUSE F
FORT LAUDERDALE FL 33304	FORT LAUDERDALE FL 33304

☐ CHECK HERE IF MAKING CHANGES

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 60-0002730 ☐ 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
DEBEVE(R), JAMES II	Name DEBEVEC, JAMES II
209 NORTH FORT LAUDERDALE BEACH BLVD.	Street Address (P.O. Box Number is Not Acceptable) 209 NORTH FORT LAUDERDALE BEACH BLVD.
PENTHOUSE F	PENTHOUSE F
FORT LAUDERDALE FL 33304-4339	City FORT LAUDERDALE FL Zip Code 33304-4339

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 James Debevec II — DATE March 24, 2003
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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	PC ☐ Delete	TITLE	PC ☑ Change ☐ Addition
NAME	DEBEVEC, JAMES II	NAME	DEBEVEC, JAMES II
STREET ADDRESS	209 NORTH FORT LAUDERDALE BEACH BLVD. (PH-F)	STREET ADDRESS	209 NORTH FORT LAUDERDALE BEACH BLVD, PH-F
CITY-ST-ZIP	FORT LAUDERDALE FL 33304-4339	CITY-ST-ZIP	FORT LAUDERDALE FL 33304-4339
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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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: James Debevec II — March 24, 2003 — (954) 764-6758
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #