## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

F44851

(6)

## **EXECUTIVE FUNDING CORPORATION**

**FILED** May 21 1998 8:00am Secretary of State

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Principal Plac	ce of Business		Mailing Addre	ess				I 10181 01101 HOT WHIT	DIBIL BIBIF BIBIL BIBIL	) <b>610</b> 01 1 <b>00</b> 1	
B900 S.W. 117 AVENUE SUITE C 101			SUITE C 101	8900 S.W. 117 AVENUE			DO NOT WRITE IN THIS SPACE				
[							3. Date Incorporated of	r Qualified			
				<del></del>			09/16/1981				
	Place of Business	5	<b>2a.</b> Mailing Ad	ddress			4. FEI Number		<del>    -   -  </del>	plied For	
21	# -1-	- ·	26				59-2125377			t Applicable	
<b></b>			27 Suite, Apt.	·			5. Certificate of Status	5. Certificate of Status Desired Section Secti			
City & State			City & Star	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees				
Zip	Country		Ζιρ	Zip Country		8. This corporation owes or has paid the current year Intangible					
24	25		29 30				Personal Property Tax due June 30.  Yes No				
	9. Name an	d Address of Curre	nt Registered Ager	ıt	10. Name and Address of New Registered Agent						
l RO	DDA, DENISE				81	Name					
8900 SW 117 AVENUE SUITE C-101					82	Street A	ddress (P.O. Box Number is N	ot Acceptable)			
	AMI FL 33186				83		\		· · · · · · · · · · · · · · · · · · ·		
"""	11111 1 1 00 100										
					84	City			FL 85 Zip C	Code	
11. Pursuant to the provisions of Sections 607 05:02 and 607 15:08, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											
SIGNATURE	Stooglery brand or o	nideo name of migratered ag	and supfitthed posts white	(NOTE: Prog	etered Am	ant compture s	equired when reinstating)	DA	*/		
12,	Digitality (system or pr		VD DIRECTORS		13.	on arguatore re	ADDITIONS/CHANGE			S IN 12	
TIFLE	CEO				1.1 TITLE		7,5517,6110,5111110.	0.10 0.11,02.10	Change	Addition	
NAME	DURHAM, I	KATHY			1.2 NAME						
STREET ADDRESS	678 CAIN [				1.3 STREET	ADDRESS				:	
CITY-ST-ZIP		SANT SC 29464			1.4 CHY-S						
TITLE	P	7			2 1 DILE				Change	Addition	
NAME	RODDA, DE	ENISE			2.2 NAME	Ì					
STREET ADDRESS		117 AVENUE SUI	TE C101		2.3 STREET	ADDRESS		,			
CITY-ST-ZIP	MIAMI FL 3				2. 4 CITY-:						
TITLE	STD				3.1 TITLE				Change	Addition	
NAME	DURHAM, H	KATHY		3	3.2 NAME						
STREET ADDRESS		117 AVENUE SUIT	TE C101	3	3.3 STREET	ADDRESS					
CITY-ST-ZIP	MIAMI FL 3	3186		3	3.4. CITY - 1	ST-ZIP					
TITLE					4.1 THLE				Change	Addition	
NAME				4	4. 2 NAME						
STREET ADDRESS	*				1.3 STREET	ADDRESS					
CITY-ST-ZIP					4.4 CITY-S	T-ZIP					
TITLE				DELETE 5	5.1 TITLE				Change	Addition	
NAME					5.2 NAME	1					
STREET ADDRESS					5.3 STREET	ADDRESS					
CITY-ST-ZIP					5.4 CITY - S					ŀ	
TITLE	-				5.1 TITLE			· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition	
NAME					6.2 NAME						
STREET ADDRESS					3 STREET	ADDRESS					
CITY-ST-ZIP			,		64 CITY - S						

14. 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 annual report or supplemental annual 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.