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PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G91980** **(4)**

1. Corporation Name

CAPITAL FACTORS, INC.

Principal Place of Business	Mailing Address
% JAVIER HOLTZ 1221 BRICKELL AVE. MIAMI FL 33131	% JAVIER HOLTZ 1221 BRICKELL AVE. MIAMI FL 33131

3. Date Incorporated or Qualified: 03/20/1984
3a. Date of Last Report: 02/21/1995

2. Principal Place of Business — 21:
2a. Mailing Address — 26:
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23:
City & State — 28:
Zip — 24:
Country — 25:
Zip — 29:
Country — 30:

4. FEI Number: 58-1565319 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

HOLTZ, JAVIER J.
1221 BRICKELL AVE.
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name: Levine, Michael
82 Street Address (P.O. Box Number is Not Acceptable):
83: 1799 West Oakland Park Boulevard
84 City: Fort Lauderdale FL 85 Zip Code: 33311

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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: Michael Levine — April 25, 1996
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent Signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DTS ASHMAN, STEPHEN N. 815 CONNECTICUT AVE, NW WASHINGTON DC	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	D Oshry, Harold 1799 Oakland Park Boulevard Oakland Park, Fl 33311	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP KIEFER, JOHN W. 1799 W OAKLAND PK BLVD FT LAUDERDALE FL	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D Raiffe, Bruce 1799 Oakland Park Boulevard Oakland Park, Fl 33311	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD HOLTZ, DANIEL 1221 BRICKELL AVE. MIAMI FL	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	D Listanowsky, Jack 1799 Oakland Park Boulevard Oakland Park, Fl 33311	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WEISELBERG, ALAN 1221 BRICKELL AVE MIAMI FL	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	D Holtz, Daniel M. 1221 Brickell Avenue, 12th Floor Miami, Fl 33131	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD HOLTZ, JAVIER 1221 BRICKELL AVE. MIAMI FL	☒ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	CD Holtz, Javier J. 1221 Brickell Avenue Miami, Fl 33131	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CHASE, RONALD 4523 SW 64 AVE MIAMI FL	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	100001803891 -05/01/96--01102--052 ***200.00	☐ Change ☐ Addition

AEB 5-1-96

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 trustee 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.

SIGNATURE: — April 25, 1996 — (305) 536-1500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Javier J. Holtz, Chairman of the Board