

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2001 8:00 am
Secretary of State

02-01-2001 90083 026 ***150.00

DOCUMENT # G91980

1. Entity Name

CAPITAL FACTORS, INC.

Principal Place of Business

**120 E PALMETTO PRK RD
 SUITE 500
 BOCA RATON FL 33432
 US**

Mailing Address

**120 E PALMETTO PRK RD
 SUITE 500
 BOCA RATON FL 33432
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

58-1565319

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**LEVINE, MICHAEL G
 120 EAST PALMETTO PARK
 SUITE 500
 BOCA RATON FL 33432**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

T ☐ Delete
**MCDERMOTT, DENNIS A
 120 E PALMETTO PARK RD
 BOCA RATON FL 33432**

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

DP ☐ Delete
**KIEFER, JOHN W.
 1799 W OAKLAND PK BLVD
 FT LAUDERDALE FL**

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

SV ☐ Delete
**LEVINE, MICHAEL
 120 E PALMETTO PARK RD
 BOCA RATON FL 33432**

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

D ☐ Delete
**MOORE, JACKSON
 7130 GOODLETT FARMS PKWY
 CORDOVA TN 38018**

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

EV ☐ Delete
**DONOHUE, STEPHEN J
 1633 BROADWAY
 NEW YORK NY 10019**

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

EV ☐ Delete
**MORRISON, JAMES
 700 S FLOWER ST
 LOS ANGELES CA 90017**

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/9/01

Date

561-368-5011

Daytime Phone #

CR2E034 (10/00)