

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0401449 AV

DOCUMENT # **G91980**

1. Entity Name
CAPITAL FACTORS, INC.



FILED

03 MAY -29 AM 8:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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

Same as above

3. Mailing Address

Same as above

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**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name **N/A**
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 **N/A** (NOTE: Registered Agent signature required when reinstating) DATE

**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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HENDRIQUES, ADOLFO 2800 PONCE DE LEON BLVD 15TH FLR CORAL GABLES FL 33134	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOLTZ, JAVIER 2800 PONCE DE LEON BLVD 15TH FLR CORAL GABLES FL 33134	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SV LEVINE, MICHAEL 120 E PALMETTO PARK RD BOCA RATON FL 33432	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOORE, JACKSON 7130 GOODLETT FARMS PKWY CORDOVA TN 38018	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV DONOHUE, STEPHEN J 1633 BROADWAY NEW YORK NY 10019	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV MORRISON, JAMES 700 S FLOWER ST LOS ANGELES CA 90017	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres & CEO, D John W. Kiefer 120 E Palmetto Park Road, 5th Floor Boca Raton, FL 33432	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP & CFO, D Dennis A McDermott 120 E. Palmetto Park Rd, 5th Floor Boca Raton, FL 33432	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	400020257614 05/29/03--01078--003 **750.00	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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: **[Signature]**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (10/02)