## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 09, 2008 08:00 AN Secretary of State

DOCL	IME	UT#	<b>K7</b>	5231
ロしょし	JIVIL_I	4 I TT	1 \ 1	<b></b> 1

1. Entity Name

PROSPECT FINANCE CORPORATION



Principal Place of Business

2570 FOREST HILL BLVD #103 W PALM BEACH, FL 33406 Mailing Address

2570 FOREST HILL BLVD #103 W PALM BEACH, FL 33406



n	$\cap$	N	OT	\ <b>\</b> /	DI.	TE	INI	TH	10	CD	$\Lambda \cap$	
u	U	IN	VI.	44			117	1 11	IJ.	JE	へし	

 
 01052008
 No Chg-P
 CR2E034 (11/05)

 4. FEI Number 65-0109300
 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

5616428744

6. Name and Address of Current Registered Agent

CARSON, WAYNE 2570 FOREST HILL BLVD 103 WEST PALM BCH, FL 33406

## DO NOT WRITE IN THIS SPACE

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 Signature, typed or printed name of registered agent and trife if applicable (NOTE, Registered Agent signature required when reinstating)  DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees							
10.	OFFICERS AND DIREC	TORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ULRIKE, CARSON 2570 FOREST HILL BLVD 103 WEST PALM BCH, FL 33406				Hopogogaalet oc		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS CARSON. WAYNE 2570 FOREST HILL BLVD 103 WEST PALM BCH, FL 33406				000000776125 01/09/08-80013-002 150.00		
TITLE NAME STREET ADDRESS CITY ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE		
TITLE NAME STREET ADORESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY: ST-ZIP							
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.							