

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$125 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **L17335**

(5)

1. Corporation Name

AFFORDABLE FINANCIAL SERVICES, INC.

Principal Place of Business

1752 S STATE ROAD 7
N LAUDERDALE FL 33068

Mailing Address

1655 SO SR 7
N LAUDERDALE FL 33068
US

FILED

95 JUL -7 AM 8:54

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
09/21/1989

3a. Date of Last Report
04/27/1994

4. FEI Number
65-0144929

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

29 Zip

30 Country

26 **1665 SO SR 7**

27 **N LAUDERDALE, FL**

29 **33068**

30 **US**

9. Name and Address of Current Registered Agent

LAZARO, SPIRO
1752 S STATE ROAD 7
N LAUDERDALE FL 33068

10. Name and Address of New Registered Agent

81 Name

DAVID J. JONES

82 Street Address (P.O. Box Number Is Not Acceptable)

1665 SO SR 7

83

84 City

N. LAUDERDALE

85 Zip Code

FL 33068

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

David J. Jones

DAVID J. JONES CONTROLLER

6-6-95

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D
LAZAROU, SPIRO
2871 NE 18 ST.
POMPANO BCH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

D/P

LAZAROU, SPIRO

1665 SOUTH STATE ROAD 7

NORTH LAUDERDALE FL 33068

☒ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

MARTINEZ, HENRY

1665 SOUTH STATE ROAD 7

NORTH LAUDERDALE FL 33068

☐ Change ☒ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

SIT

JONES, DAVID J.

1665 SOUTH STATE ROAD 7

NORTH LAUDERDALE FL 33068

☐ Change ☒ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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 110.07(3)(k), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 as changed, or as an attachment with an address.

SIGNATURE

Spiro Lazarou

SPIRO LAZAROU

6 JUN 95

305-974-3313

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

PHONE NUMBER

CR2E034 (3/95)