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CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L60741

(0)

EXECUTIVE FINANCIAL ASSOCIATES, INC.

FILED May 19 1997 8:00am Secretary of State



| Principal Place of Business Mailing Address | | | | | | I (BBrift): Bif Still entil innit Stant tiat t | '' | | 1911 1941 |
|---|--|--|--------------------------|--------------------------------|-------------------|--|---------------------------------------|----------------|------------------|
| C/O HARESH R | | 5723 WESTSHORE DIRVE | | | | | | | |
| 5723 WESTSHO | | 5723 WESTSHORE DRIVE NEW PORT RICHEY FL 34 | 652,3036 | | | | | | |
| NEW PORT RICHEY FL 34652 | | US | | | | 3. Date Incorporated or Qualified 03/23/1990 | ed 3a. Date of Last Report 05/01/1996 | | |
| 2. Principal Pi | ace of Business | 2a. Mailing Address | | | | | | | plied For |
| 21 | | 26 | | | | 59-3009337 | 59-3009337 Not Applicable | | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | | | 8.75 | Additional |
| 22 | | 27 | | | | 5. Certificate of Status Desired | ' ليا | Fee Re | quired |
| City & State | | City & State | City & State | | | 6. Election Campaign Financing | | \$5.00 | May Be |
| 23 | | 28 | | | | Trust Fund Contribution | | Added t | o Fees |
| Zip | Country | Zip | -g | | | 8. This corporation has liability for intangible tax under s. 199.032, | | | |
| 24 | 25 | | 30 | | | Florida Statutes Yes No 10. Name and Address of New Registered Agent | | | |
| | 9. Name and Address of Curren | t Registered Agent | | 81 | Neme | 10. Name and Address of New He | gisterea Age | •n1 | |
| | NDI, RICH | | | • | Name | | | | |
| | WESTSHORE DRIVE | | Ī | 82 | Street Addr | ess (P.O. Box Number is Not Acceptab | le) | | |
| NEW | PORT RICHEY FL 34652 | | - | 83 | | | | | |
| | | | | " | | | | | |
| | | | İ | 84 | City | | - I-I I | 7 Zip (| |
| 11. Pursuant t | o the provisions of Sections 607.050. | 2 and 607.1508, Horida Statut | es, the at | OOVO- | named corp | oration submits this statement for the pion's board of directors. I hereby accep | urpose of ch | anging it | s registered |
| office or re agent. Lar | egistered agent, or both, in the State m familiar with, and accept the obliga | of Florida. Such change was ations of Section 607.0505, F1 | authorized orida Stat | d by ules. | the corporat | ion's board of directors. I hereby accep | ot the rippoin | ment as | registered |
| SIGNATURE | Wiel Sun ander | | AND: | | | | 4/29/9 | 7 | |
| | Sterialure, typed or printed name of registered ago | of and title if applicable (NCI | E Hog-stered | Agen | iuper autorogia l | ed when reinstating) | DATE | DEOTOD | 0.11.40 |
| 12. | OFFICERS AND | DELETE DELETE | 13. 1.1 TO | | | ADDITIONS/CHANGES TO OFFIC | | Change | S IN 12 Addition |
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| NAME | | | 4.2 NA | | | | | | ļ |
| STREET ADDRESS | | | 4.3 STREFT ADDRESS | | ADDRESS | | | | ĺ |
| CITY-ST-ZIP | | | 4.4 CHY- ST- ZIP | | | | | | |
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| NAME | ame : | | 5.2 NAME | | | | | | |
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| NAME | | | 6 2 NA | MA | | | | | |
| STREET ADDRESS | | | 6.3 S1 | IREE I | ADDRESS | | | | |
| CITY-ST-ZIP | | | 6 4 CI | 1Y-S1 | I-ZIP | 13.0 | _ (£() | مياد فأدس | *1.0 |
| 1 14. do hereb | by certify that the information supplier | d with this filing does not qual | ny for the | exer | mption stated | d in Section 119.07(3)(i), Florida Statute | s. ∓turther ce | arury that | LIO |

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 trustoe empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changest, or on any attachment with an address.