

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Brenda S. Meritham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L76737

1. Corporation Name

Business Funding of Florida, Inc.

Principal Place of Business

Mailing Address

Ste. 540- 2700 S. Quincy St., Same
Arlington, VA 22206

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

5/30/90

4. FEI Number

65-0205700

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

7. This corporation owes or has paid the current year's eligible Personal Property Tax due June 30

Yes

No

2. Principal Place of Business

2a. Mailing Address

21

2a

Suite, Apt., #, etc.

Suite, Apt., #, etc.

22 City & State

21 City & State

23

Zip

County

2b

Zip

County

24

25

County

26

Zip

County

8. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Eugene Haskin
#2904 - 4000 Island Blvd.
North Miami Beach, FL 33160

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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 607.0503, Florida Statutes.

SIGNATURE

Signature of current agent or new agent (if applicable)

NOTE: Additional Agent agreement required when appointing

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: CEO
NAME: Richard A. Brasch
STREET ADDRESS: Same as #1
CITY-ST-ZIP: Same as #1

DELETE

11 TITLE: Change Addition
12 NAME:
13 STREET ADDRESS:
14 CITY-ST-ZIP:

TITLE: CEO
NAME: George Demas
STREET ADDRESS: Same as #1
CITY-ST-ZIP: Same as #1

DELETE

21 TITLE: Change Addition
22 NAME:
23 STREET ADDRESS:
24 CITY-ST-ZIP:

TITLE: Pres.
NAME: Craig Fishman
STREET ADDRESS: Same as #1
CITY-ST-ZIP: Same as #1

DELETE

31 TITLE: Change Addition
32 NAME:
33 STREET ADDRESS:
34 CITY-ST-ZIP:

TITLE: Secy. & VP
NAME: Wade Hotsenpiller
STREET ADDRESS: Same as #1
CITY-ST-ZIP: Same as #1

DELETE

41 TITLE: Change Addition
42 NAME: 600002632058
43 STREET ADDRESS: --09/04/98--01047--035
44 CITY-ST-ZIP: ***550.00

TITLE: Director
NAME: Peter Matthy
STREET ADDRESS: Same as #1
CITY-ST-ZIP: Same as #1

DELETE

51 TITLE: Change Addition
52 NAME:
53 STREET ADDRESS:
54 CITY-ST-ZIP:

TITLE: Secy. Treas.
NAME: Lawrence Winkler
STREET ADDRESS: Same as #1
CITY-ST-ZIP: Same as #1

DELETE

61 TITLE: Change Addition
62 NAME:
63 STREET ADDRESS:
64 CITY-ST-ZIP:

12. I hereby certify that the information supplied with this filing does not comply for the exception stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information included on this annual report of a governmental entity is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the registered agent authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attached change of agent.

SIGNATURE:

85
8-31