## 2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N93000000616

TI FILED
Sep 02, 2008
Secretary of State

Entity Name: BLACK BUSINESS CAPITAL FINANCING CORPORATION

Current Principal Place of Business: New Principal Place of Business:

315 E. ROBINSON ST. SUITE 660 ORLANDO, FL 32801

Current Mailing Address: New Mailing Address:

315 E. ROBINSON ST. SUITE 660 ORLANDO, FL 32801

FEI Number: 59-3179911 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LONG, INEZ
315 E. ROBINSON STREET
SUITE 660
ORLANDO, FL 32801 US

THE FLORIDA LAW FIRM
1990 WEST FAIRBANKS AVE
WINTER PARK, FL 32789 US

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.

SIGNATURE: ODI ARUGU 09/02/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 ( ) Delete
 Title:
 D
 (X) Change ( ) Addition

 Name:
 LONG, INEZ
 Name:
 CHUKWU, LAWRENCE

Address: 315 EAST ROBINSON ST SUITE 660 Address: 315 EAST ROBINSON ST SUITE 660

City-St-Zip: ORLANDO, FL 32801 City-St-Zip: ORLANDO, FL 32801 US

Title: D ( ) Delete Title: D (X) Change ( ) Addition

Name:CHUCKWU, LAWRENCEName:BOSCH, SUSANAddress:315 EAST ROBINSON ST SUITE 660Address:315 EAST ROBINSON ST SUITE 660

City-St-Zip: ORLANDO, FL 32801 City-St-Zip: ORLANDO, FL 32801 US

Title: D () Delete Title: D (X) Change () Addition
Name: BRASCH, SUSAN Name: REDDICK, ALZO

 Address:
 315 E. ROBINSON ST., SUITE 660
 Address:
 315 E. ROBINSON ST., SUITE 660

 City-St-Zip:
 ORLANDO, FL 32801
 City-St-Zip:
 ORLANDO, FL 32801 US

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 REDDICK, ALZO
 Name:

 Address:
 315 E. ROBINSON ST. STE 660
 Address:

 City-St-Zip:
 ORLANDO, FL 32801
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: INEZ LONG (ON BEHALF OF RA) RA 09/02/2008