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CORPORATION ANNUAL REPORT

1999

Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 06, 1999 8:00 am
Secretary of State
07-06-1999 90001 018 ****61.25

DOCUMENT # N97000006497

1. Corporation Name

AMERICAN CREDIT & DEBT MANAGEMENT, INC.

Principal Place of Business | Mailing Address

605153 - 90001 - 50

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21 3145 S. FEDERAL HIGHWAY	26 3145 S. FEDERAL HIGHWAY	11-18-97
Suite, Apt. #, etc. 22 —	Suite, Apt. #, etc. 27 —	4. FEI Number 31-1588295 ☐ Applied For ☐ Not Applicable
City & State 23 DELRAY BEACH, FL.	City & State 28 DELRAY BEACH, FL.	5. Certifcate of Status Desired ☐ $8.75 Additional Fee Required
Zip 24 33483 Country 25 USA	Zip 29 33483 Country 30 USA	6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
	81 Name ROSHEN HADULLA
	82 Street Address (P.O. Box Number is Not Acceptable) 1864 MONTE CARLO WAY
	83
	84 City CORAL SPRINGS, FL 85 Zip Code 33071

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE Roshen Hadulla - ROSHEN HADULLA, PRESIDENT 6-28-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D — VICE PRESIDENT NAME SMITH, RAHN F. STREET ADDRESS 5776 NORTH POINTE LANE CITY-ST-ZIP BOYNTON BEACH, FL. 33437-2018	☐ DELETE	1.1 TITLE D 1.2 NAME SHROFF, ZARIN 1.3 STREET ADDRESS 1864 MONTE CARLO WAY 1.4 CITY-ST-ZIP CORAL SPRINGS, FL. 33071	☐ Change ☑ Addition
TITLE D — TREASURER NAME EPSTEIN, LINDA STREET ADDRESS 2920 N.W. 41st St. CITY-ST-ZIP Boca Raton, FL. 33434	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE D — PRESIDENT NAME HADULLA, ROSHEN STREET ADDRESS 1864 MONTE CARLO WAY CITY-ST-ZIP CORAL SPRINGS, FL. 33071	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE D — DIRECTOR NAME KARANI, PHIL (DECEASED) STREET ADDRESS CITY-ST-ZIP	☒ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (11/98)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Roshen Hadulla - ROSHEN HADULLA, PRESIDENT - 6-28-99 - 561-243-3505
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #