

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 27, 2001 8:00 am
Secretary of State

06-27-2001 90004 017 ***158.75

DOCUMENT # **P00000011852**

1. Entity Name

THE ABACUS EXCHANGE, INC.

Principal Place of Business

**1201 NE 14th AVE.
 #1
 FT. LAUDERDALE, FL 33304**

Mailing Address

**1007 N. FEDERAL I
 PMB 276**

FT. LAUDERDALE, FL 33304 72584

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0984656

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
 Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CHARLES KANTROWITZ
 1201 NE 14th AVENUE
 #1
 FT. LAUDERDALE, FL 33304**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **CHIEF EXECUTIVE OFFICER** ☐ Delete
 NAME **WILLIAM F. EWING, III**
 STREET ADDRESS **1201 NE 14th AVE, #1**
 CITY-ST-ZIP **FT. LAUDERDALE, FL 33304**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **CHIEF OPERATIONS OFFICER** ☐ Delete
 NAME **CHARLES KANTROWITZ**
 STREET ADDRESS **1201 NE 14th AVE, #1**
 CITY-ST-ZIP **FT. LAUDERDALE, FL 33304**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

13. 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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **William F. Ewing**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

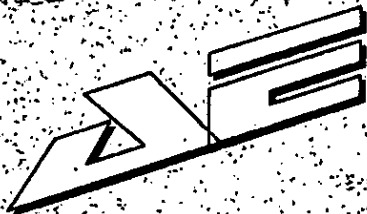
CHIEF EXECUTIVE OFFICER

Date

Daytime Phone #

954-763-3433

CR2E034 (11/00)



The ABACUS EXCHANGE Inc.

Attachment

P000003118

772584

25 April, 2001

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee FL 32302-1500

Dear Division of Corporations Representative:

Enclosed, please find our Uniform Business Report. Please send to me a certificate reflecting our status, and add \$8.75 to the \$150.00 filing fee. Your website states that I may use the Discover Card for payment. Please charge the amount of \$158.75 to my Discover Card account number 6011-0042-6062-9593 exp 08/03.

This is the first year that we are completing the UBR, so if you should require additional information, please feel free to contact me.

Thank you very much for your assistance.

Sincerely,

William Ewing
Chief Executive Officer

1007 North Federal Highway
PMB 276
Fort Lauderdale, FL 33304

Phone: 954-763-3433
Fax: 877-977-4537
Email: info@abacusexchange.com