2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P00000023998

1. Entity Name EQUUS FINANCIAL GROUP, INC.



Principal Place of Business

234 EAST DAVIS BLVD. TAMPA, FL 33606

Mailing Address

234 EAST DAVIS BLVD. TAMPA, FL 33606

FILED Apr 05, 2004 08:00 AM Secretary of State

DO NOT WRITE IN THIS SPACE	DO	NOT	WRITE	IN THIS	SPACE
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5. Name and Address of Current Registered Agent

03082004	No Chg-P	CR2E034 (10/03)	-

4. FEI Number 59-3634151 5. Certificate of Status Desired

Applied For Not Applicable

\$8.75 Additional Fee Required

234 EAST DAVIS BLVD. TAMPA, FL 33606		IN THIS SPACE	
The above named entity submits this statement for the the obligations of registered agent.	purpose of changing its registered office or	registered agent, or both	, in the State of Florida. I am familiar with, and accept
SigNATURE Signature, typed or printed name of registered agent and title	of applicable (NOTE Registered Agent signatu	re required when reinstating)	DATE
File NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
18. OFFICERS AND DIRE INTLE PD NAME FOUNTAIN, MICHAEL W STREET ADDRESS CITY-S1-20P TAMPA, FL 33626 TITLE STRICT ADDRESS CITY-S1-20P TAMPA, FL 33626 ITTLE NAME STREET ADDRESS CITY-S1-20P TAMPA, FL 33626 TRUE NAME STREET ADDRESS CITY-S1-20P		DO	U00000102979 04/05/04-80037-021 150.00 NOT WRITE
TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP	=======================================	IN T	HIS SPACE
TITLE MAME STREET ADDRESS CITY-ST-ZP 12. I hereby certify that the information supplied with this indicated on this report or supplemental report is true	filing does not qualify for the exemption state and accurate and that my signature shall ha	ad in Section 119.07(3)(1) ave the same legal effect the 507 Endris Challes), Florida Statutes. I further certify that the information as if made under oath; that I am an officer or director; and that my name appears in Block 10 or Block 11 if