## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## FILED Apr 06, 2001 8:00 am Secretary of State DOCUMENT # P0000053906 EZ MORTGAGE OF DAYTONA, INC. 04-06-2001 90021 020 \*\*\*150.00 Principal Place of Business Mailing Address 1501 RIDGEWOOD AVE., STE. 206 1501 RIDGEWOOD AVE., STE. 206 U0031681 HOLLY HILL FL 32117 HOLLY HILL FL 32117 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For Not Applicable Country Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C. balasso Suzanne VARANO, RENO Street Address (P.O. Box Number is Not Acceptable) 1501 RIDGEWOOD AVE., STE. 206 HOLLY HILL FL 32117 daewood 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 d agent and title if applicable 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS CR2E034 (10/00) TITLE ☐ Delete TITLE ☐ Change Juzanne C. Galasso KOWITZ, ARTHUR NAME NAME 1501 Ridgewood Ave, Ste 206 1501 RIDGEWOOD AVE., STE. 206 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOLLY HILL FL 32117 CITY-ST-ZIP TITLE Delete TITLE VARANO, RENO NAME NAME Ridgewood Ave 1501-206 1501 RIDGEWOOD AVE., STE. 206 STREET ADDRESS STREET ADDRESS Hin FL 32117 CITY-ST-ZIP HOLLY HILL FL 32117 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □. Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 suppliemental 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 refereive or trugtee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 is changed, or on an attachment with address, with a other like empowered.

hor Kowitz 3/14/01