2001 UNIFORM BUSINESS REPORT (UBR)

May 11, 2001 8:00 am Secretary of State DOCUMENT # P0000073574 1. Entity Name DEBT SOLUTIONS, INC. 05-11-2001 90084 005 ***150.00 Mailing Address Principal Place of Business 7300 NORTH FEDERAL HIGHWAY 7300 NORTH FEDERAL HIGHWAY SUITE 105 SUITE 105 BOCA RATON FL 33487-1631 BOCA RATON FL 33487 - 1631 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State <u> 119</u>261-29 Not Applicable Zip \$8.75 Additional Country Zip Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SCHWARTZ, KENNETH Street Address (P.O. Box Number is Not Acceptable) 7300 NORTH FEDERAL HIGHWAY SUITE 105 BOCA RATON FL 33487 - いっるい Zip Code City 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. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00) Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition TITLE PD Delete TITLE NAME NAME SCHWARTZ, KENNETH STREET ADDRESS STREET ADDRESS 7300 NORTH FEDERAL HIGHWAY, SUITE 105 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33487** ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME OLIVER, JARRETT NAME STREET ADDRESS STREET ADDRESS 5114 BALCONES WOODS DRIVE CITY-ST-ZIP CITY-ST-ZIP **AUSTIN TX 78759** Addition ☐ Change ☐ Delete TITLE TITLE BELLEW, SARAH NAME STREET ADDRESS STREET ADDRESS 7300 NORTH FEDERAL HIGHWAY, SUITE 105 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33487** Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE 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 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 on powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 in Block 12

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

KENDETH SCHWARTS

PRESIDENT

changed, or on an attac

SIGNATURE: \(\frac{\fin}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac}{\frac{\frac{\frac{\frac{\frac{\frac}{\frac{\frac{\frac{\frac}{\frac}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\fir}{\fir}}}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\fir}{\frac{\frac{\frac{\frac{\frac{\fir}}{\frac{\frac{\frac{\frac}}}}}{\frac{\frac{\frac{\frac{\frac{\fir}{\frac{\frac{\frac{\frac