

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2001 8:00 am
Secretary of State

04-18-2001 90111 026 ***150.00

DOCUMENT # P00000074432

1. Entity Name
A.F.M. FINANCIAL GROUP INC.

Principal Place of Business 7519 N.W. 43 COURT CORAL SPRINGS FL 33065	Mailing Address 7519 N.W. 43 COURT CORAL SPRINGS FL 33065
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00047925



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 124 S. FEDERAL HIGHWAY	3. Mailing Address 124 S. FEDERAL HIGHWAY
Suite, Apt. #, etc. U-3	Suite, Apt. #, etc. U-3

City & State POMPAU BEACH, FLORIDA	City & State POMPAU BEACH, FLORIDA	4. FEI Number 65-1057454	Applied For <input type="checkbox"/> Not Applicable
Zip 33064	Country BROWARD	Zip 33064	Country BROWARD

6. Name and Address of Current Registered Agent MARCO, ANTHONY F SR 7519 N.W. 43 COURT CORAL SPRINGS FL 33065	7. Name and Address of New Registered Agent Name MARCO, ANTHONY F. SR. Street Address (P.O. Box Number is Not Acceptable) 124 S. FEDERAL HIGHWAY City POMPAU BEACH FL Zip Code 33064
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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 Anthony F. Marco **ANTHONY F. MARCO** Anthony F. Marco **4/10/01**
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. <input checked="" type="checkbox"/> (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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARCO, ANTHONY F SR 7519 N.W. 43 COURT CORAL SPRINGS FL 33065	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: Anthony F. Marco **ANTHONY F. MARCO** 4/10/01 **954-753-4825**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)