

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P00000096279

1. Entity Name

AAA FINANCIAL ADVISORS INC. DBA NEW CENTURY FINANCIAL

FILED
SECRETARY OF STATE
CORPORATIONS

02 OCT 14 PM 12:01

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

452 OSCOLA ST

3. Mailing Address

452 OSCOLA ST

Suite, Apt. #, etc.

207

Suite, Apt. #, etc.

207

City & State

ALPHAMETTE SPRINGS FL

City & State

ALPHAMETTE SPRINGS FL

Zip

32701

Country

USA

Zip

32701

Country

USA

4. FEI Number

59-3675887

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

JAMES BALTHAZAR

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

1294 CROW WAY # 112

City

CASSEL BERRY

FL

Zip Code

32707

**DO NOT WRITE
IN THIS SPACE**

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 re-instating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
PRESIDENT	JAMES BALTHAZAR	1294 CROW WAY # 112	CASSEL BERRY FL 32707
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
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TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, without other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DISPATCH NUMBER

10/10/02 (467) 375-9006

1011516200

To: Department of State
From: James Balthazar
Subject: Uniform Buisness Report

I am sending in the Uniform Buisness Report late because I never received the form in the mail. This happened to me last year as well. For whatever reason I'm not receiving these forms at the appropriate time. Sorry for the inconvenience.