

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 28, 2002 8:00 am**  
**Secretary of State**

05-28-2002 91512 022 \*\*\*150.00

USC2027 AV

**DOCUMENT # P00000106391**

1. Entity Name

**PYROL BANKERS FINANCIAL SERVICES, INC.**

Principal Place of Business

**7535 W OAKLAND PARK BLVD  
TAMARAC FL 33319**

Mailing Address

**7535 W OAKLAND PARK BLVD  
TAMARAC FL 33319**

2. Principal Place of Business

**2758 W. Oakland Pk Blvd**  
Suite, Apt. #, etc.

3. Mailing Address

**2758 W. Oakland Pk Blvd**  
Suite, Apt. #, etc.

City & State

**Oakland Pk, FL**

City & State

**Oakland Pk, FL**

Zip

**33311**

Country

**U.S.A.**

Zip

**33311**

Country

**U.S.A.**

4. FEI Number

**65-0745371**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**JEANTY, JOHN  
7535 W OAKLAND PARK BLVD  
TAMARAC FL 33319**

7. Name and Address of New Registered Agent

Name

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

**2758 W. Oakland Pk Blvd.**

City

**Oakland Pk**

**FL**

Zip Code

**33311**

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 reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**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 **P** ☐ Delete  
NAME **JEANTY, JOHN**  
STREET ADDRESS **7535 W PAKLAND PARK BLVD**  
CITY-ST-ZIP **TAMARAC FL 33319**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME **P**  
STREET ADDRESS **2758 W. Oakland Pk Blvd**  
CITY-ST-ZIP **Oakland Park, FL 33311**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

CR2E034 (9/01)

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3-18-02**

Date

Daytime Phone #