

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000040615

FILED  
Feb 08, 2006  
Secretary of State

Entity Name: AFFILIATED RECEIVABLES CORPORATION

## Current Principal Place of Business:

4651 SHERIDAN ST. SUITE 100  
HOLLYWOOD, FL 33021

## New Principal Place of Business:

13680 NW 5 STREET  
220  
SUNRISE, FL 33325

## Current Mailing Address:

4651 SHERIDAN ST. SUITE 100  
HOLLYWOOD, FL 33021

## New Mailing Address:

13680 NW 5 STREET  
220  
SUNRISE, FL 33325

FEI Number: 47-0868946

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KOSS, JEREMY A ESQ.  
4651 SHERIDAN ST. SUITE 100  
HOLLYWOOD, FL 33021 US

## Name and Address of New Registered Agent:

KOSS, JEREMY A ESQ.  
13680 NW 5 STREET  
220  
SUNRISE, FL 33325 US

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: JEREMY A KOSS

02/08/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: JACOBS, DOUGLAS J  
Address: 4651 SHERIDAN ST. SUITE 100  
City-St-Zip: HOLLYWOOD, FL 33021

Title: D ( ) Delete  
Name: LEHMAN, WILLIAM JR.  
Address: 21400 N.W. 2ND AVENUE  
City-St-Zip: MIAMI, FL 33169

Title: D ( ) Delete  
Name: STIDD, ANDREW L  
Address: 114 WEST 47TH STREET SUITE 1715  
City-St-Zip: NEW YORK, NY 10036

Title: D ( ) Delete  
Name: BURNS, KEVIN P  
Address: 114 WEST 47TH STREET SUITE 1715  
City-St-Zip: NEW YORK, NY 10036

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: JACOBS, DOUGLAS J  
Address: 13680 NW 5 STREET SUITE 220  
City-St-Zip: SUNRISE, FL 33325

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOUGLAS J JACOBS

D

02/08/2006

Electronic Signature of Signing Officer or Director

Date