2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000040615

Entity Name: AFFILIATED RECEIVABLES CORPORATION

FILED Mar 23, 2003 Secretary of State

Current Principal Place of Business:

New Principal Place of Business:

3900 HOLLYWOOD BLVD.

4651 SHERIDAN ST. SUITE 100

SUITE 201 HOLLYWOOD, FL 33021

Current Mailing Address: New Mailing Address:

3900 HOLLYWOOD BLVD. 4651 SHERIDAN ST. SUITE 100 SUITE 201 HOLLYWOOD, FL 33021

FEI Number: 47-0868946 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KOSS, JEREMY A ESQ.
4000 HOLLYWOOD BLVD.
SUITE 265-S
HOLLYWOOD, FL 33021 US

KOSS, JEREMY A ESQ.
4651 SHERIDAN ST. SUITE 100
HOLLYWOOD, FL 33021 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: 03/23/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 JACOBS, DOUGLAS J
 Name:
 JACOBS, DOUGLAS J

 Address:
 3900 HOLLYWOOD BLVD., SUITE 201
 Address:
 4651 SHERIDAN ST. SUITE 100

 City-St-Zip:
 HOLLYWOOD, FL 33021
 City-St-Zip:
 HOLLYWOOD, FL 33021

Title: D () Delete Title: () Change () Addition

 Name:
 LEHMAN, WILLIAM JR.
 Name:

 Address:
 21400 N.W. 2ND AVENUE
 Address:

 City-St-Zip:
 MIAMI, FL 33169
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 STIDD, ANDREW L
 Name:

 Address:
 114 WEST 47TH STREET SUITE 1715
 Address:

 City-St-Zip:
 NEW YORK, NY 10036
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 BURNS, KEVIN P
 Name:

 Address:
 114 WEST 47TH STREET SUITE 1715
 Address:

 City-St-Zip:
 NEW YORK, NY 10036
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 03/23/2003