2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000041618

Entity Name: FINTO, INC.

FILED Jan 11, 2003 Secretary of State

() Change () Addition

Current Principal Place of Business: New Principal Place of Business:

1701 N. FLAGLER DRIVE 1801 N. FLAGLER DRIVE

SUTIE 315 # 733

WEST PALM BEACH, FL 33407 WEST PALM BEACH, FL 33407

Current Mailing Address: New Mailing Address:

1701 N. FLAGLER DRIVE 1801 N. FLAGLER DRIVE

SUTIE 315 #733

WEST PALM BEACH, FL 33407 WEST PALM BEACH, FL 33407

FEI Number: 65-1112732 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

SEHLIKOGLU, ABDULLAH SERKAN 1701 N. FLAGLER DRIVE SEHLIKOGLU, ABDULLAH SERKAN 1801 N. FLAGLER DRIVE

SUTIE 315 #733

WEST PALM BEACH, FL 33407 WEST PALM BEACH, FL 33407

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: SERKAN ABDULLAH SEHLIKOGLU 01/11/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

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

Title:D() DeleteTitle:D(X) Change () AdditionName:SEHLIKOGLU, ABDULLAHName:SEHLIKOGLU, ABDULLAH SERKANAddress:1701 N. FLAGLER DRIVEAddress:1701 N. FLAGLER DRIVE

City-St-Zip: WEST PALM BEACH, FL 33407 City-St-Zip: WEST PALM BEACH, FL 33407

 Title:
 SVD () Delete
 Title:

 Name:
 CARRICK, DEBORAH
 Name:

 Address:
 1701 N. FLAGLER DRIVE
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33407
 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: SERKAN ABDULLAH SEHLIKOGLU D 01/11/2003