2003 FOR PROFIT CORPORATION

FILED Sep 02, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** P01000079414 DOCUMENT # 09-02-2003 90191 024 ***150.00 1. Entity Name CARLYLE FINANCIAL GROUP, INC. Principal Place of Business Mailing Address 8411 W. OAKLAND PARK BLVD #202 8411 W. OAKLAND PARK BLVD #202 SUNRISE FL 33351 SUNRISE FL 33351 2. Principal Place of Business 3. Mailing Address 1701 W HILLBORD BLUD Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES 103 SHIFE City & State City & State 4. FEI Number Applied For 65-1159463 DEFFIELD Not Applicable Country ---\$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name STEBBINS, KENNETH H Street Address (P.O. Box Number is Not Acceptable) 8411 W. OAKLAND PARK BLVD #202 SUNRISE FL 33351 Zip Code City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition SMITH, ALAN G NAME NAME STREET ADDRESS 8411 W. OAKLAND PARK BLVD #202 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP SUNRISE FL 33351 TITLE ST ☐ Delete TITLE Change Addition STEBBINS, KEN H NAME NAME STREET ADDRESS 8411 W. OAKLAND PARK BLVD #202 STREET ADDRESS CITY-ST-ZÎP CITY-ST-ZIP-SUNRISE FL 33351 ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Change ☐ Addition ☐ Delete NAME NAME

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIE

NAME

☐ Delete

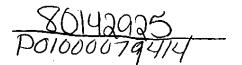
Change

Addition

AHachment#

CARLYLE FINANCIAL GROUP INC

1701 W HILLSBORO BLVD DEERFIELD BEACH, FL 33442 (954) 418-0064 FAX: (954) 418-6464



August 29, 2003

Division of Corporations P.O. Box 1500 Tallahassee, FI 32302

RE: Filing Fee

Gentlemen:

Attached please find our check and renewal form for our corporation.

We moved from 8411 Oakland Park Blvd in Sunrise Florida in November 2002 and never received the original renewal format out new address. We respectfully ask that you accept this form and our check to keep our corporation in good standing.

Sincerely,

Ken Stebbins

Secretary/Treasurer