## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED May 07, 2002 8:00 am Secretary of State

4-12-2002

DOCUMEN! # P01000118848  1. Entity Name Alliance Bailbonds Agency, Inc.			05-07-2002 90240 035 ***158.75	
	J			
DO NOT WRITE	E IN THIS SE	PACE		
2. Principal Place of Business 807 Belvedere Road	3. Mailing Address 807 Belvedere Road			
Suite, Apt. #, etc. N/A	Suite, Apt. #, etc. N/A		DO NOT WRITE IN THIS SPACE	
City & State West Palm Beach, FL	City & State West Palm Beach, FL		4. FEI Number 65-1158674	Applied For Not Applicable
Zip Country 33405 USA	Zip 3.3405	Country USA	5. Certificate of Status Desired	Fee Required
DO NOT W	RITE		7. Name and Address of Current Regist n Robert Achille	ered Agent
IN THIS SPACE		Street Address (P.O. Box Number is Not Acceptable) 807 Belvedere Road		
		City West	Palm Beach	FL Zip Code 33405
8. The above named entity submits this tratement for	L. V. Ala	registered office or registe	ered agent, or both, in the State of Florida.	,
SIGNATURE Signature Typed or printed name of registered agent	and title if applicable. (NOTE:	Jean R Registered Agent signature require	obert Achille, P/V	/T/S/D 4-12-2002
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)	After May 1 Amended	ay 1 Fee is \$150.00 1, Fee is \$550.00   UBR Is \$61.25  e to Department of Sta	10. Election Carnpaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
11. OFFICERS AND $P/V/T/S/D/$		TITLE		
NAME Jean Robert Ach STREET ADDRESS 807 Belvedere F CITY-ST-ZIP West Palm Beach	≀oad	NAME STREET ADDRESS CITY-ST-ZIP		,
TITLE NAME STREET ADDRESS		TITLE NAME STREET ADDRESS		
CITY-ST-ZIP		CITY-ST-ZIP TITLE		
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TITLE NAME STREET ADDRESS	, ,,,,,,,,	CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS		
I hereby certify that the information supplied with indicated on this report or supplemental report is of the corporation or the receiver or trustee empattachment with an address, with all other like experience.	this filling does not qualify for it true and accurate and that my overed to efecute this report powered.	he exemption stated in Se r signature shall have the as required by Chapter 6	ection 119.07(3)(i), Florida Statutes. I further same legal effect as if made under oath; tha 07, Florida Statutes; and that my name app	certify that the information t I am an officer or director ears in Block 11 or on an