2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000003897

FILED Apr 30, 2003 Secretary of State

Entity Name: E\	/ANS FINANCIAL, INC.	
Current Principal Place of Business:		New Principal Place of Business:
4495 SW 67TH TE DAVIE, FL 33314	ERRACE, STE 209	
Current Mailing Address:		New Mailing Address:
4495 SW 67TH TE DAVIE, FL 33314	ERRACE, STE 209	
FEI Number: 30-0045	FEI Number Applied For()) FEI Number Not Applicable () Certificate of Status Desired ()
Name and Addre	ss of Current Registered Agen	t: Name and Address of New Registered Agent:
LANDY, NANCI S 2700 S. COMMER WESTON, FL 333	RCE PKWY., STE. 305	
The above named in the State of Flor		the purpose of changing its registered office or registered agent, or both,
SIGNATURE:		
E	Electronic Signature of Registered	d Agent Date
Election Campaign F	Financing Trust Fund Contribution ().	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	() Delete	Title: SEC () Change (X) Addition Name: EVANS, ARIADNA M SECRETA Address: 4495 SW 67TH TERRACE, SUITE 209 City-St-Zip: DAVIE, FL 33314 US
Title: Name: Address: City-St-Zip:	() Delete	Title: PRES () Change (X) Addition Name: EVANS, JOSEPH G PRESIDE Address: 4495 SW 67TH TERRACE, SUITE 209 City-St-Zip: DAVIE, FL 33314 US
Title: Name: Address: City-St-Zip:	() Delete	Title: VP () Change (X) Addition Name: EVANS, ARIADNA M VICE PR Address: 4495 SW 67TH TERRACE, SUITE 209 City-St-Zip: DAVIE, FL 33314 US
Title: Name: Address: City-St-Zin:	() Delete	Title: TREA () Change (X) Addition Name: EVANS, JOSEPH G TREASUR Address: 4495 SW 67TH TERRACE, SUITE 209 City-St-Zin: DAVIF FL 33314 US

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: ARIADNA M. EVANS 04/30/2003 SEC