

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91898 049 ***150.00

DOCUMENT # P02000022571

1. Entity Name

BUSINESS FINANCE SERVICES, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

531 SE 13th Street

3. Mailing Address

531 SE 13th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Pompano Beach, Florida

City & State

Pompano Beach, Florida

4. FEI Number

04-3621790

Applied For

Not Applicable

Zip
33060

Country
US

Zip
33060

Country
US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Angelo, Barry & Boldt, P.A.

Street Address (P.O. Box Number is Not Acceptable)

515 East Las Olas Blvd, Suite 850

City
Fort Lauderdale

FL

Zip Code
33301

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
D/P/T	Marc Weiss	4774 North Powerline Road	Pompano Beach, Florida 33073
DVP/S	Dwight E. Dykes	531 SE 13th Street	Pompano Beach, Florida 33060

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address with all other like empowered.

SIGNATURE:

Dwight E. Dykes
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dwight E. Dykes

4/30/03

(954) 426-0002

Date

Daytime Phone #