

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000036174

1. Entity Name
AMERICA'S BEST MORTGAGE SERVICES INC.



Principal Place of Business
5450 W. HILLSBORO BLVD.
#3
COCONUT CREEK FL 33073

Mailing Address
5450 W. HILLSBORO BLVD.
#3
COCONUT CREEK FL 33073



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

01-0657997

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Richard Crowder
8326 NW 42nd Place
Parkland, FL 33067

Name Richard Crowder
Street Address (P.O. Box Number is Not Acceptable)
8326 NW 42nd Place
Parkland, FL 33067
City FL Zip Code

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

Richard Crowder
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE S
NAME WINTERS, SUSANNE
STREET ADDRESS 1572 NE 28TH STREET
CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME Richard Crowder
STREET ADDRESS 8326 NW 42nd Place
CITY-ST-ZIP Parkland, FL 33067

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP
NAME Charles Andrews
STREET ADDRESS 8326 NW 42nd Place
CITY-ST-ZIP Parkland, FL 33067

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
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STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE:

Richard Crowder
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)