


AMENDED UBR

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FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **PD2000085085**

1. Entity Name
FOUNDERS CAPITAL CORPORATION



FILED

03 AUG 14 AM 10:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

200022612772
08/27/03--01056--009 **\$1.25

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
500 N. WESTSHORE BLVD.
Suite, Apt. #, etc.
Suite 920

3. Mailing Address
SAME AS #2
Suite, Apt. #, etc.

City & State
TAMPA, FL.

City & State
Fla

4. FEI Number
223862372

5. Certificate of Status Desired **\$8.75** Additional Fee Required

Zip
33609 Country

Zip Country

Applied For
Not Applicable

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IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
MICHAEL CANDITO

Street Address (P.O. Box Number is Not Acceptable)
500 N. WESTSHORE BLVD

SUITE 920

City
TAMPA FL Zip Code
33609

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 _____ (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	PD ANDY INSUA 500 N. WESTSHORE BLVD., Suite 920 TAMPA, FL. 33609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DTVP MICHAEL CANDITO 500 N. WESTSHORE BLVD., Suite 920 TAMPA, FL. 33609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S VICTORIA PARDO 500 N. WESTSHORE BLVD., Suite 920 TAMPA, FL. 33609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: Michael Candito **8/5/03** **(813)637-9500**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)

Attachment # _____

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500 North Westshore Boulevard
Suite 920
Tampa, Florida 33609
Phone: (813) 637-9500
Fax: (813) 637-9502

Founders Capital Corporation

August 5, 2003


Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Amended Uniform Business Report

Please find enclosed our Amended Uniform Business Report changing the Secretary of Founders Capital Corporation to Victoria Pardo. Also, enclosed is a check in the amount of \$61.25 for said change.

If you need any further information, please feel free to call me at (813) 637-9500.

Regards,


Michael Candito