

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 09, 2003 8:00 am
Secretary of State

01-09-2003 90026 021 ***158.75



☒ CHECK HERE IF MAKING CHANGES

DOCUMENT # P02000115787		1. Entity Name JORDAN FINANCIAL CORP.	
Principal Place of Business 5400 S. UNIVERSITY DR., SUITE 310 DAVIE FL 33328		Mailing Address 5400 S. UNIVERSITY DR., SUITE 310 DAVIE FL 33328	
2. Principal Place of Business 5400 S. UNIVERSITY DR. Suite, Apt. #, etc. SUITE 310 City & State DAVIE		3. Mailing Address 5400 S. UNIVERSITY DR. Suite, Apt. #, etc. SUITE 310 City & State DAVIE	
Zip 33328-5310	Country USA	Zip 33328-5310	Country USA Broward
4. Name and Address of Current Registered Agent BEYER, STEPHEN 2201 NW CORPORATE BLVD., SUITE 103 BOCA RATON FL 33431		4. FEI Number 02-0651937 Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		7. Name and Address of New Registered Agent	
		Name Street Address (P.O. Box Number is Not Acceptable) 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 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. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEYER, STEPHEN 2201 CORPORATE BLVD., NW, SUITE 103 BOCA RATON FL 33431 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P-C-D PRESIDENT - DIRECTOR-CHAIRMAN STEPHEN B. PASEKIND 11575 S.W. 37th COURT DAVIE, FL 33330-1017 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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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: *Stephen B. Pasekind* **1-7-03** **954-476-0553**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date Daytime Phone #

CR2E034 (10/02)