

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000128441

FILED
Jan 24, 2004
Secretary of State

Entity Name: ENTRUST CREDIT SERVICES, INC.

Current Principal Place of Business:

4675 PONCE DE LEON BLVD SUITE 302
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

4675 PONCE DE LEON BLVD SUITE 302
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 06-1669904

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUILLERMO ANDRADE, CPA, PA
255 ALHAMBRA CIR SUITE 720
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

GREGORY MLACKER
9500 S.W. 63CT.
PINECREST, FL 33156 US

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.

SIGNATURE: GREGORY MLACKER

01/24/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MLACKER, GREGORY A
Address: 4675 PONCE DE LEON BLVD SUITE 302
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: GREGORY MLACKER

PRES

01/24/2004

Electronic Signature of Signing Officer or Director

Date