

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 25, 2005 8:00 am
Secretary of State

07-25-2005 90098 026 ***150.00

DOCUMENT # P03000095664

1. Entity Name
UNITED FINANCE GROUP, INC.



Principal Place of Business

**225 NE MIZNER BLVD
#300
BOCA RATON, FL 33432**

Mailing Address

**225 NE MIZNER BLVD
#300
BOCA RATON, FL 33432**

50057325



07012005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0197552

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**TOSCANO, ANTHONY
225 NE MIZNER BLVD
#300
BOCA RATON, FL 33432**

**DO NOT WRITE
IN THIS SPACE**

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME TOSCANO, ANTHONY
STREET ADDRESS 225 NE MIZNER BLVD #300
CITY-ST-ZIP BOCA RATON, FL 33432

TITLE VD
NAME TOSCANO, MICHELE
STREET ADDRESS 225 NE MIZNER BLVD #300
CITY-ST-ZIP BOCA RATON, FL 33432

TITLE T
NAME TOSCANO, IDA
STREET ADDRESS 225 NE MIZNER BLVD #300
CITY-ST-ZIP BOCA RATON, FL 33432

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-1805 561 620-2670

ATTACHMENT

50057325

**UNITED FINANCE GROUP, INC.
225 NE MIZNER BLVD. # 300
BOCA RATON, FL. 33432**

June 30th, 2005

Division of Corporations
Annual Report Section
P.O. Box 6327
Tallahassee, FL 32314

REF: United Finance Group, Inc.
Document#: P03000095664

Dear Sir or Madam:

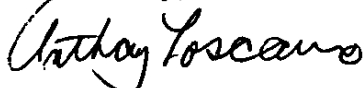
Please be advised that the above-mentioned corporation annual report was never received for timely submission.

Therefore, we are requesting that the delinquent fees be waived and that the corporation is allowed to submit a second annual report with the corresponding fee of \$ 150.00

Please advise.

Your cooperation is appreciated.

Sincerely,



Anthony Toscano

AT/fz