P9300005426

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 1. Entity Name

FORMAN FINANCIAL, INC.

Principal Pla	ace of Business	Mailing Address		· · · · ·				
960 CORAL RIDGE DR		960 CORAL RIDGE DR						
# 301		# 301			}			
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2. Principal Place of Business								
2045 Avausta Terr		3. Mailing Address 2045 August Tecr			/	.11 88:11 881(1 88(1) 86)	ini Gilti Aifi	a nimin Gini Lådi
Suite, Apt. #, etc.		Suite, Apt. #, etc.			MOITE IN THIS SE	ACE.		
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City & State		City & State		4. FEI Number OF 007074F Applie			pplied For	
Coral Springs FU.		Coral Springs FL.		ۍ د.	00703787	65-0378745		ot Applicable
335	Ountry.	3 3 C) 7 (Country S A	<u> </u>	5. Certificate of Status Desire		8.75 Ad	
<u></u>	6. Name and Address of Current F	Registered Agent	<u> </u>	, ,	7. Name and Address of Ne		e Require	ed
			Name		***************************************	- riegistered Ag	CIIL	
FORMAN, RONALD			Stroot	Address (F	O Bau Nivelania Natana		.	
960 COF	ral ridge dr	Street Address ((P.O. Box Number is Not Acceptable) Terr			
# 301								
COPAL SPRINGS FL 33071 City City Cal Spring S FL Zip Code 3300 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 obligation of confidence of the confidence								
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.								
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SIGNATURE	Signature, typest or printed name of registered agent an	Ronald Ronald	Registered Agent signat	-We	W-President	9/4/0	<u> </u>	
		<u> </u>			when reinstating)	DATE		
 This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. FILE NOW!!! After September 13. 			FEE IS \$550.	.00 #750 0	10. Election Campaign	Financing	\$5.0	0 мау Ве
	ria on back)	After September 13, 2002 Fee will be \$750.0 Make Check Payable to Department of State		N T	~ —		to Fees	
11.	OFFICERS AND D		12,		ADDITIONS/CHANGES TO C	VERICEBS AND D	IDECTOR	C IN 44
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13. 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 11 or Block 12 if changed, or on an attack the state of the corporation of the receiver of the corporation of the receiver of trustee empowered.

SIGNATURE:

REDICERDLY J. Forms 9/4/02 954-345-5600