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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P93000041700 (4) DOCUMENT # 1. Corporation Name INFINITY FINANCIAL, INC. Principal Place of Business Mailing Address 2269 S UNIVERSITY DR 2269 S UNIVERSITY DR SUITE 171 SUITE 171 DAVIE FL 33324 DAVIE FL 33324 Date incorporated or Qualified 06/11/1993 3a. Date of Last Report 03/22/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0422804 26 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s 199.032, 24 25 29 30 ☐ Yes ☐ No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MORGAN, DAN H Street Address (P.O. Box Number is No. A-2300 CORPORATE BLVD., NW #221 SUITE 171 83 **BOCA RATON FL 33431** 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typod or printed matte of registered agent and title. I applicable DATE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1. 1 TITLE ☐ Change Addition MORGAN, DAN H NAME 1.2 NAME 2300 CORPORATE BLVD. NW #221 STREE! ADDRESS 1.3 STREET ADDRESS BOCA RATON FL 3743 CITY-ST-7IP 1.4 CITY - ST - ZIP TITLE DELETE 2 1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CHY-S1-ZIP 24 CITY-ST-ZiP THEF DELETE 3 1 TITLE Change Addition NAME 3 2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST ZIP 3 4 CITY - ST - ZIP TITLE DELETE 4 1 TITLE ☐ Change ☐ Addition NAME 4.2 NAME STHEET ADDRESS 4.3 STREET ADDRESS Off Y-S1-782 4.4 CITY - ST - ZIP TITLE DELETE 5 1 TITLE Change ■ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if cha attachment with an address.

52 NAME

6 1 TITLE

62 NAME

☐ DELETE

OR PRINTED NAME OF SIGNING OFFICER OR

5.3 STREET ADDRESS

6.3 STREET ADDRESS

64 CITY-ST-ZIP

5 4 CITY - ST - ZIP

SIGNATURE:

NAMe

TILLE

STREET ADDRESS.

SPREET ADDRESS

CITY - ST - ZIP

CHY-SI-ZIE

Change

■ Addition

CR2E034 (12/95)