

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P94000012467

FILED
Aug 17, 2003
Secretary of State

Entity Name: PHONE PROGRAMS FINANCIAL CORP.

Current Principal Place of Business:

2000 N. OCEAN BLVD.
STE. 705
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

34 E. MAIN STREET
PMB 269
SMITHTOWN, NY 11787

New Mailing Address:

FEI Number: 22-2427656

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLDMAN, MARK
2000 N. OCEAN BLVD.
APT. 705
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: GOLDMAN, MARK
Address: 34 E. MAIN STREET, PMB 269
City-St-Zip: SMITHTOWN, NY 11787

Title: DP () Delete
Name: FOGEL, BRUCE
Address: 34 E. MAIN STREET, PMB 269
City-St-Zip: SMITHTOWN, NY 11787

Title: DS (X) Delete
Name: WEINER, FREDERICK
Address: 34 E. MAIN STREET, PMB 269
City-St-Zip: SMITHTOWN, NY 11787

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: GOLDMAN, MARK
Address: 34 E MAIN ST PMB 269
City-St-Zip: SMITHTOWN, NY 11787

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

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: MARK GOLDMAN

DT

08/17/2003

Electronic Signature of Signing Officer or Director

Date