

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000019020

1. Entity Name

FIRST FINANCIAL LEADS & REFERRALS SERVICES CO., INC.

Principal Place of Business

Mailing Address

2. Principal Place of Business

255 LU LANE

3. Mailing Address

P.O. Box 1163

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

DOOLTEWAH, TN.

City & State

COLLEGE DALE, TN

4. FEI Number

65-0473479

Applied For

☒ Not Applicable

Zip

Country

37363-6546

USA

Zip

Country

37315-1163

USA

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required.

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

ORLANDO PINO

Street Address (P.O. Box Number is Not Acceptable)

255 LU LANE

City

DOOLTEWAH, TN.

FL

Zip Code

37363-6546

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.

SIGNATURE

Orlando Pino ORLANDO PINO, PRES.

7/24/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME **SD**
STREET ADDRESS **PINO, LILWAN**
CITY-ST-ZIP **255 LU LANE DOOLTEWAH, TN. 37363-6546**

TITLE ☒ Change ☐ Addition
NAME **P**
STREET ADDRESS **PINO, ORLANDO**
CITY-ST-ZIP **255 LU LANE DOOLTEWAH, TN. 37363-6546**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 attachment with an address, with all other like empowered.

SIGNATURE:

Orlando Pino ORLANDO PINO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/24/00

Date

423-396-6962

Daytime Phone #

CR2E034 (9/99)