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Mar 10 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000033141 (9)

1. Corporation Name  
INVOICE FUNDING USA, INC.

Principal Place of Business  
6910 TOWN HARBOR BLVD  
SUITE 2718  
BOCA RATON FL 33433

Mailing Address  
6910 TOWN HARBOR BLVD  
SUITE 2718  
BOCA RATON FL 33433-5095



3. Date Incorporated or Qualified 04/26/1995	3a. Date of Last Report 06/13/1996
4. FEI Number 65-0576312	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 2300 W. SAMPLE Rd Suite Apt #, etc. 22 202 City & State 23 Pompano Beach, FL Zip 24 33073 Country 25 USA	2a. Mailing Address 26 2300 W. SAMPLE Rd Suite Apt #, etc. 27 202 City & State 28 Pompano Beach, FL Zip 29 33073 Country 30 USA
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9. Name and Address of Current Registered Agent WOLFMAN, MICHAEL P 6910 TOWN HARBOR BLVD SUITE 2718 BOCA RATON FL 33433	10. Name and Address of New Registered Agent 81 Name WOLFMAN, MICHAEL P. 82 Street Address (P.O. Box Number is Not Acceptable) 5880 TOWN HARBOR BLVD SUITE 1024 83 84 City BOCA RATON FL 85 Zip Code 33486
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 Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE: MICHAEL P. WOLFMAN 3/5/97 (NOTE: Registered Agent signature required when reinstating)	

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY - ST - ZIP D MALLER, STEPHEN R 125 10 QUEENS BLVD KEW GARDENS NY	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP D FARKAS, RICHARD 9230 DE ESTE CT LAKEWORTH FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP CP WOHMAN, MICHAEL 6910 TOWN HARBOR BLVD STE 2718 BOCA RATON FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP CP WOLFMAN, MICHAEL 5880 TOWN HARBOR BLVD APT 1024 BOCA RATON, FL 33486 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
3/5/97 954-970-1090  
Date Daytime Phone #

CR2E034 (9/96)