

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000068975

Entity Name

MIAMI FLORIDA TITLE LOANS, INC.

FILED
May 10, 2000 8:00 ar
Secretary of State

05-10-2000 90174 048 ***150.00

Principal Place of Business

Mailing Address

NW OLD 441
FL 34475

3826 NW OLD 441
OCALA FL 34475

Principal Place of Business

3. Mailing Address

314 SW 143RD LANE RD
Suite, Apt. #, etc.

3814 SW 143RD LANE RD
Suite, Apt. #, etc.

City & State

OCALA, FL

City & State

OCALA, FL

4. FEI Number

59-3332448

Applied For

Not Applicable

Country
4473

USA

Zip

34473

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BARLOW, KEVIN L
3826 NW OLD 441
OCALA FL 34475

7. Name and Address of New Registered Agent

Name

MICHAEL D. BRAYTON

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

3814 SW 143RD LANE RD

City

OCALA

FL

Zip Code

34473

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Corporation is eligible to satisfy its Intangible
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**

OFFICERS AND DIRECTORS

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

<p>PTD BARLOW, KEVIN L 3826 NW OLD 441 OCALA FL 34475</p> <p><input checked="" type="checkbox"/> Delete</p>	<p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p> <p>PRESIDENT/TREASURER MICHAEL D. BRAYTON 3814 SW 143RD LANE RD OCALA FL 34473</p> <p><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</p>
<p>VSP BARLOW, HOYT 3826 NW OLD 441 OCALA FL 34475</p> <p><input checked="" type="checkbox"/> Delete</p>	<p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p> <p>VP/SECRETARY PATRECEA A. BRAYTON 3814 SW 143RD LANE RD OCALA FL 34473</p> <p><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</p>
<p><input type="checkbox"/> Delete</p>	<p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p> <p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p>
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<p><input type="checkbox"/> Delete</p>	<p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p> <p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p>

I 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 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:

Michael D. Brayton
MICHAEL D. BRAYTON

4/29/00

Date

352-347-0257

Daytime Phone #

CR2E034 (9/99)