2001 UNIFORM BUSINESS REPORT (UBR)

Jul 10, 2001 8:00 am DOCUMENT # P96000060107 **Secretary of State** 05-02-2001 90094 006 ***150.00 FIRST LENDERS FINANCIAL GROUP, INC. Principal Place of Business Mailing Address 157 E. NEW ENGLAND AVENUE 157 E. NEW ENGLAND AVENUE 10040 SUITE #402 **SUITE #402** WINTER PARK FL 32789 WINTER PARK FL 32789 US 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Applied For 4. FEI Number 59-3388840 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CINTRON, ANA Street Address (P.O. Box Number is Not Acceptable) 157 E. NEW ENGLAND AVENUE **SUITE #402** WINTER PARK FL 32789 City Zip Code FL 8. The above named eg ts this statement fo the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE. (NOTE: Registered Agent signature required when rematating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be Added to Fees 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS OFFICERS AND DIRECTORS IN 11 11. 12. Delete TITLE TITLE NAME CLARETTI, CLAUDIO NAME 57 E. New 157 E. NEW ENGLAND AVENUE, SUITE #402 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP WINTER PARK FL 32789 PRES Change Addition TITLE TITLE ATTILIO VONZIN NAME MAME STREET ADDRESS STREET ADDRESS 3555 MAGUIE BLVD ST 204 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32803 ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Chance ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Change TITLE ☐ Deteta NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 13. I 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 report or superferred to execute the end 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 a other like empowered. SIGNATURE:

IG OFFICER OR DIRECTOR

FILED

Deytime Phone #

	· -		9
117.3	1838 SO O S	• \	
Ğ	\ \ \ .	OLDARS	
A CONTRACTOR OF THE PROPERTY O	\$ 10		
A Closina enst.		0	
Storonthurk, Illimi	DATE C		100
LISCHOEK-MITTHERMOTO-SAIGO CAROUP, INC. STE-402			00 a
Inschouse LGRO STE 402			00000000000000000000000000000000000000
AND AVE			
for the the second on the front of this cheeks and that NDERS FINANCIAL GROUP, 157 E. NEW ENGLAND AVE. STE. 402. WINTER PARK, FL. 32789.			
) } \$	
FIRSTLE		Ameri	
_	PAY TO THE ORDER OF	Bankof A	
The state of the s	PAY TOTT ORDE	`` & ₹	FOR