## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P96000079408

Entity Name: REAL TRUST FINANCIAL CORP.

FILED Feb 04, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1308 N. LAVON AVE. KISSIMMEE, FL 34741 US

Current Mailing Address: New Mailing Address:

1308 N. LAVON AVE. KISSIMMEE, FL 34741 US

FEI Number: 59-3407150 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

AISTROP, GRAHAM
3501 W VINE ST
STE 322-A
KISSIMMEE, FL 34741 US

REALTEK REAL ESTATE BROKERS INC
1308 N LAVON AVENUE
KISSIMMEE, FL 34741 US

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: GRAHAM AISTROP 02/04/2002

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 VP () Delete
 Title:
 PTS (X) Change () Addition

 Name:
 AISTROP, GRAHAM P
 Name:
 REALTEK REAL ESTATE, BROKERS INC

 Address:
 3501 W VINE ST, #322-A
 Address:
 1308 NORTH LAVON AVENUE

City-St-Zip: KISSIMMEE, FL City-St-Zip: KISSIMMEE, FL 34741 US

Title: Title: VΡ (X) Change ( ) Addition TS () Delete BRADSHAW, JOAN Name: Name: OLIVEIRA, NELSON DR. 3501 W VINE ST, STE 322-A 1308 NORTH LAVON AVENUE Address: Address: KISSIMMEE, FL 34741 KISSIMMEE, FL 34741 US City-St-Zip: City-St-Zip:

Title: P (X) Delete Title: ( ) Change ( ) Addition

 Name:
 CAMARA, CAS
 Name:

 Address:
 3501 W VINE ST SUITE 322-A
 Address:

 City-St-Zip:
 KISSIMMEE, FL 34741
 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: GRAHAM AISTROP DIR 02/04/2002