FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000050292 (6)

EQUITY LENDING, INC.

FILED Apr 24 1998 8:00am Secretary of State

Principal Place of Business Mailing Address				I IDDAHOUR IID IBIIII FERRI BURII BOULL BULLI BERDI BARA BOULD CIBIE CEINE IIDI RUDI		
1805 N. MAC TAMPA FL 33		1805 N. MACDILL AVE TAMPA FL 33607	NUE			
				DO NOT WRITE IN THI 3. Date incorporated or Qualified	S SPACE	
				06/05/1997		
2. Principal F	lace of Business	2a, Mailing Address		4. FEI Number	Applied For	
21		26		59-3455012	Not Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, etc.			\$8.75 Additional	
22		[27]		5. Certificate of Status Desired	Fee Required	
City & Stat		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	a. This corporation owes or has paid the c		
24	25 Same and Address of Curre	29	[30]	Personal Property Tax due June 30. 10. Name and Address of New Registere	Yes X No	
		ant Hedistered Adens	81 Name	10. Name and Address of New Registere	a waaur	
	IAN, JEFFREY A 500 N. DALE MARRY MICHWAY		MARILYN FERNANDEZ			
14502 N. DALE MABRY HIGHWAY SUITE 300				dress (P.O. Box Number is Not Acceptable)		
TAMPA FL 33618				1605 N. MAC DILL AVE		
TAMES TE SOOTO				TAMPA, FL 33607		
			84 City	F	85 Zip Code	
11. Pursuant	to the provisions of Sections 607.05	02 and 607 1508, Florida Sta	tutes, the above-named o	orporation submits this statement for the purpose	of changing its registered	
office or r	registered agent, or both, in the Stat im familiar with, and accept the obli	le of Florida. Such change wa gal⊌ns of, Section 607.050≨,	s authorized by the corpo Florida Statutes.	oration's board of directors. I hereby accept the ap	opointment as registered	
SIGNATURE	Thoreton 2	Fernand		4/15	198	
	Signature typestor printed higher of regular dis	thresholdings FER	11 L. Fl. pidnigu 1990 agnazare re			
TOLE	OFFICERS A	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 Change Addition	
NAME	FERNANDEZ, MARILYN	butt	1.2 NAME		[] Muchion	
STREET ADDRESS	1605 N. MACDILL AVENUE		1.3 STREET ADDRESS			
CITY - \$T - ZIP	TAMPA FL 33607		1.4 CITY-ST-ZIP			
TITLE		DELETE	21 TITLE		Change Addition	
NAME		-	2 2 NAME		2.00	
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2. 4 CITY - ST - ZIP			
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME			3 2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-S1-ZIP	<u> </u>		3.4. CITY - ST - 2(P			
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP		·	4.4 CITY - ST - ZIP			
TETLE		L DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS	i e		E a exercit apprece			
SINEET AUDINESS	:		6.3 STREET ADDRESS			

14. Thereby 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 coereivor 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.