

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 14, 2000 08:00 AM
Secretary of State

DOCUMENT # P97000056357

1. Entity Name
 RELIABLE LOAN CORP.

Principal Place of Business C/O SHELDON ENGELHARD THE PLAZA, STE. 801, 5355 TOWN CNTR. ROAD BOCA RATON FL 33486	Mailing Address C/O SHELDON ENGELHARD THE PLAZA, STE. 801, 5355 TOWN CNTR. ROAD BOCA RATON FL 33486
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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DO NOT WRITE IN THIS SPACE

City & State	City & State	4. FEI Number 65-0763554	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent ENGELHARD SHELDON ESQ. THE PLAZA, SUITE 801 5355 TOWN CENTER ROAD BOCA RATON FL 33486 US		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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8. 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 _____ (NOTE Registered Agent signature required when reinstating)
 Signature, typed or printed name of registered agent and title if applicable

04/14/2000
DATE

9. This corporation is eligible to satisfy its Intangible Tax 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

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	S	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MAIZES ISAAC		NAME		
STREET ADDRESS	5355 TOWN CENTER RD., STE 801		STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33486		CITY-ST-ZIP		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	ENGELHARD SHELDON		NAME		
STREET ADDRESS	5355 TOWN CENTER RD, STE 801		STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33486		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

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 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: SHELDON ENGELHARD

04/14/2000

JOSE F PEDREIRA VICE PRESIDENT
5355 TOWN CENTER RD., STE 801

BOCA RATON, FL 33486