


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Sep 22, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P98000012467  
 1. Entity Name  
 VFINANCE HOLDINGS, INC.



Principal Place of Business 3010 N. MILITARY TRAIL #300 BOCA RATON, FL 33431 US	Mailing Address 3010 N. MILITARY TRAIL #300 BOCA RATON, FL 33431 US
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07022004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0813993	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 VFIN EXECUTIVE SERVICES, INC  
 3010 N. MILITARY TRAIL  
 SUITE 300  
 BOCA RATON, FL 33431

**DO NOT WRITE IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00  
 Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SOKOLOV, LEONARD J 2458 PROVENCE COURT WESTON, FL 33327
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MAHONEY, TIMOTHY 68 CAYMAN PLACE PALM BEACH GARDENS, FL 33418
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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 09/22/04-80002-003 550.00

**DO NOT WRITE IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Leonard Sokolov* 9/1/04 561.981.1025  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #