

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Jan 10, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # P98000014213**1. Entity Name  
SPRINGS LENDING CORP.

Principal Place of Business	Mailing Address
7911 NW 72ND AVE	481 DE SOTO DRIVE
SUITE 109-A	
MEDLEY SPRINGS FL	MIAMI SPRINGS FL
33166	33166

2. Principal Place of Business	3. Mailing Address
7911 NW 72ND AVE	20031 E OAKMONT DR

Suite, Apt. #, etc.	Suite, Apt. #, etc.
SUITE 109-A	

City & State	City & State
MEDLEY FL	MIAMI LAKES FL

Zip	Country	Zip	Country
33166		33015	

4. FEI Number	Applied For
65-0811606	Not Applicable

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

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**

ENDARA JORGE A  
481 DE SOTO DRIVE  
  
MIAMI SPRINGS FL  
33166 US

**7. Name and Address of New Registered Agent**

Name  
ENDARA JORGE A  
Street Address (P.O. Box Number is Not Acceptable)  
20031 E OAKMONT DRIVE  
  
City  
MIAMI LAKES FL Zip Code  
33015

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 **JORGE A ENDARA****01/10/2001**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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, 2001 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**

TITLE	PSD	<input type="checkbox"/> Delete
NAME	ENDARA JORGE A	
STREET ADDRESS	481 DE SOTO DRIVE	
CITY-ST-ZIP	MIAMI SPRINGS FL 33166	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	PSD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ENDARA JORGE A	
STREET ADDRESS	20031 E OAKMONT DRIVE	
CITY-ST-ZIP	MIAMI LAKES FL 33015	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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: JORGE A ENDARA**

PSD

01/10/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)