2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **P98000022926** Mar 20, 2000 8:00 am 1. Entity Name **Secretary of State** EQUITABLE FINANCIAL GROUP, INC. 03-20-2000 90025 015 ***150.00 Principal Place of Business Mailing Address 633 SOUTH FEDERAL HIGHWAY 633 SOUTH FEDERAL HIGHWAY FT. LAUDERDALE FL 33301-3164 FT. LAUDERDALE FL 33301 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0899883 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SPUTE, H. WILLIAM JR. Street Address (P.O. Box Number is Not Acceptable) 633 SOUTH FEDERAL HIGHWAY FT. LAUDERDALE FL 33301 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back). ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition ☐ Delete TITLE TITLE NAME SPUTE, WILLIAM H JR. NAME 6978 NW 62ND TERRACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PARKLAND FL 33067 Addition ☐ Change ☐ Delete TITLE TITLE NAME Allen, Stuart STREET ADDRESS STREET ADDRESS 20191 E. Country Club Dr. Apt. PH7 CITY-ST-ZIP CITY-ST-ZIF Av**en**tura, FL. ☐ Change Addition ☐ Detete TITLE TITLE NAME Evans, James D. STREET ADDRESS STREET ADDRESS 5420 S.W. 134th Drive CITY-ST-7IP CITY-ST-ZIP Miami, FL. 33156 Change Addition ☐ Defete TITLE NAME NAME Klein, Norman S. STREET ADDRESS STREET ADDRESS 16025 W. Prestwick Place CITY-ST-ZIP CITY-ST-ZIP Miami Lakes, FL, 33014 ☐ Change Addition Delete TITLE TITLE D NAME NAME Leader, Jerry STREET ADDRESS STREET ADDRESS 1115 Rédwood St. CITY-ST-ZIP CITY-ST-ZIP Hollywood, FL. 33019 □ Change Addition D ☐ Delete TITLE TITLE NAME Masur, Wayne K. NAME STREET ADDRESS STREET ADDRESS 2680 Hunter Court CITY-ST-ZIP CITY-ST-ZIP Ft. Lauderdale, FL. 13. 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 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 trusted 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.

changed, or on an attachment with an

MITURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE