PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000030782

1. Corporation Name

FIRST STATE CAPITAL FUNDING CORP.

Film	apai P	race	3 OI E	SUSII
2033	MAIN	ST.	STE	303

Mailing Address

2033 MAIN ST. STE 303

FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90051 029 ***150.00



SARASOTA FL 34237	SARASOTA FL 34237		DO NOT WRITE IN THIS SPACE		
			3. Date Incorporated or Qualifed 04/01/1998		
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21			65-0850979	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country	Zip	Country	8. This corporation owes the current year Inta	angible	
24 25	29	30	Personal Property Tax.	☐ Yes ☐ No	
	Current Registered Agent		10. Name and Address of New Registered	Agent	
		81 Name			
SABA, RICHARD D		82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)		
2033 MAIN ST, STE 303		BZ Sileet Aut	uless (F.O. Box Number is Not Acceptable)		
SARASOTA FL 34237		83			
	•	84 City		85 Zip Code	
			F <u>L</u>		
 Pursuant to the provisions of Sections 6 office or registered agent, or both, in the agent. I am familiar with, and accept the 	07.0502 and 607.1508, Florida Statutes State of Florida. Such change was aut obligations of, Section 607.0505, Florid	s, the above-named cor thorized by the corporat da Statutes.	poration submits this statement for the purpose of tion's board of directors. I hereby accept the appoir	changing its registered atment as registered	
SIGNATURE Signature, typed or printed name of regis	tered agent and title if applicable. (NOTE: F	Registered Agent signature requir	red when reinstating) DATE		
	RS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12	
TITLE D	☐ DELETE	1.1 TITLE	Z	hange Addition	
NAME CAPLAN, SAM G	CAPLAN, SAM G		CAPLAN, SAM 6		
	A COLUMN THE POLICE CONTROL OF THE COLUMN TH			ά	
	CANADA H3Y 1S1		505—3495 MOUNTAIN S NONTREAL, QUEBEC: H3G	r 2.45	
TITLE	(DELÉTÉ	1.4 CITY-ST-ZIP 2.1 TITLE		☐ Change ☐ Addition	
NAME		2.2 NAME		}	
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-ST-ZIP		3.4. CITY-ST-ZIP	•		
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		_	
TITLE	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME		5.2 NAME		1	
STREET ADDRESS		5.3 STREET ADDRESS			
CITY-ST-ZIP		5.4 CITY-ST-ZIP	<u></u>		
TITLE	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME		6.2 NAME		ł	
STREET ADDRESS		6.3 STREET ADDRESS			
CITY-ST-ZIP,		6.4 CITY-ST-ZIP			
O111-01-E11.35			Continue (40 07/2)(i) Elevido Statutas I further and	Cf. Ale at Ale a lafa and atlant	

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 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 corporation of the receiver 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, of an apparament with an address, with all other like empowered.

SIGNATURE: