

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000057192

1. Entity Name

A1 FINANCIAL MANAGEMENT SERVICES, INC.

FILED
Jan 12, 2000 8:00 am
Secretary of State

01-12-2000 90047 050 ***150.00

Principal Place of Business

1634 S. ATLANTIC BLVD.
#2
POMPANO BEACH FL 33060

Mailing Address

1634 S. ATLANTIC BLVD.
#2
POMPANO BEACH FL 33060-6751

2. Principal Place of Business

1634 E. ATLANTIC BLVD
Suite, Apt. #, etc.
#2

3. Mailing Address

1634 E. ATLANTIC BLVD
Suite, Apt. #, etc.
#2

City & State
POMPANO BEACH FL.

City & State
POMPANO Bch. FL.

Zip
33060

Zip
33060

4. FEI Number 65-0850166

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

YOUNG, LESTER
124 NE 4 STREET
POMPANO BEACH FL 33060

7. Name and Address of New Registered Agent

Name
LESTER YOUNG
Street Address (P.O. Box Number is Not Acceptable)
22744 SW 54th WAY
City BOCA RATON FL Zip Code 33433

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 Lester Young LESTER YOUNG PRES. 1/3/2000
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, 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

TITLE PD
NAME YOUNG, LESTER
STREET ADDRESS 124 NE 4 STREET
CITY-ST-ZIP POMPANO BEACH FL 33060 ☐ Delete

TITLE VD
NAME DEMOS, DEBRA
STREET ADDRESS 124 NE 4 STREET
CITY-ST-ZIP POMPANO BEACH FL 33060 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition
NAME YOUNG, LESTER
STREET ADDRESS 22744 SW 54th WAY
CITY-ST-ZIP BOCA RATON FL 33433

TITLE VD ☒ Change ☐ Addition
NAME DEMOS, DEBRA
STREET ADDRESS 22744 SW 54th WAY
CITY-ST-ZIP BOCA RATON FL 33433

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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: Lester Young LESTER YOUNG
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-3-2000 954 941-9511
Date Daytime Phone #

CR20034 (9/99)