

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000058948

FILED
Jun 09, 2006
Secretary of State

Entity Name: CSI BUSINESS FINANCE, INC.

Current Principal Place of Business:

1761 W. HILLSBORO BLVD.
SUITE 203
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

109 N. POST OAK LN
SUITE 422
HOUSTON, TX 77024 US

Current Mailing Address:

1761 W. HILLSBORO BLVD.
SUITE 203
DEERFIELD BEACH, FL 33442

New Mailing Address:

109 N. POST OAK LN
SUITE 422
HOUSTON, TX 77024 US

FEI Number: 65-0847995

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

D'ALONZO, MARCO
1761 W. HILLSBORO BLVD
DEERFIELD BEACH, FL 33442 US

Name and Address of New Registered Agent:

PARKER, CLAYTON E ESQ.
201 SOUTH BISCAYNE BLVD.
20TH FLOOR
MIAMI, FL 33131 US

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: CLAYTON E. PARKER

06/09/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VTD () Delete
Name: D'ALONZO, MARCO
Address: 1761 W. HILLSBORO BLVD., S-203
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: PSD (X) Delete
Name: BAKER, DOUGLAS
Address: 1761 W. HILLSBORO BLVD., S-203
City-St-Zip: DEERFIELD BEACH, FL 33442

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: CONNOLLY, TIMOTHY J
Address: 109 N. POST OAK LN, SUITE 422
City-St-Zip: HOUSTON, TX 77024

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY J. CONNOLLY

PSTD

06/09/2006

Electronic Signature of Signing Officer or Director

Date