

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000098635

1. Entity Name

AMERICAN DEBT CONSOLIDATION, INC.

FILED
May 30, 2000 8:00 am
Secretary of State

05-30-2000 90078 006 ***150.00

Principal Place of Business

Mailing Address

6574 NORTH STATE ROAD 7
SUITE 101
COCONUT CREEK FL 33073

6574 NORTH STATE ROAD 7
SUITE 101
COCONUT CREEK FL 33073-3625

2. Principal Place of Business

4201 N. Federal Highway

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite E

Suite, Apt. #, etc.

Same

City & State

Pompano Beach, FL

City & State

Same

Zip

33064 Broward

Zip

Same

Country

Same



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0881279

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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)

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PTD ☐ Delete
NAME THOMAS, KEVIN
STREET ADDRESS 6574 NORTH STATE ROAD 7
CITY-ST-ZIP COCONUT CREEK FL 33073

TITLE PTD ☒ Change ☐ Addition
NAME THOMAS, KEVIN
STREET ADDRESS 4201 N. Federal Highway, Suite E
CITY-ST-ZIP Pompano Beach, FL 33064

TITLE SVD ☐ Delete
NAME GREVE, SCOT
STREET ADDRESS 6574 NORTH STATE ROAD 7
CITY-ST-ZIP COCONUT CREEK FL 33073

TITLE SVD ☒ Change ☐ Addition
NAME GREVE, SCOT
STREET ADDRESS 4201 N. Federal Highway Suite E
CITY-ST-ZIP Pompano Beach, FL 33064

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)