

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2002 8:00 am
Secretary of State

03-24-2002 90011 024 ***150.00

DOCUMENT # P99000040332

1. Entity Name
DEBT MANAGEMENT ASSOCIATES INTERNATIONAL, INC.

Principal Place of Business Mailing Address
~~150 E PALMETTO PARK RD~~ ~~150 E PALMETTO PARK RD~~
~~SUITE 650~~ ~~SUITE 650~~
~~BOCA RATON FL 33432~~ ~~BOCA RATON FL 33432~~



2. Principal Place of Business
150 East Palmetto Park Rd

Suite, Apt. #, etc.
Suite 650

City & State
Boca Raton, FL

Zip Country
33432

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number **65-0916660** Applied For
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

~~ULLMAN, HOWARD F.~~
~~150 E PALMETTO PARK ROAD~~
~~SUITE 650~~
~~BOCA RATON FL 33432~~

7. Name and Address of New Registered Agent

Name
Howard F. Ullman
 Street Address (P.O. Box Number is Not Acceptable)
150 East Palmetto Park Road
Suite 650
 City **Boca Raton** **FL** Zip Code **33432**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 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	D	<input type="checkbox"/> Delete
NAME	KOKINOS, GEORGE L	
STREET ADDRESS	700 BANYAN TRAIL SUITE 200	
CITY-ST-ZIP	BOCA RATON FL 33431	
TITLE	DS	<input type="checkbox"/> Delete
NAME	ULLMAN, HOWARD F	
STREET ADDRESS	150 E PALMETTO PARK ROAD SUITE 650	
CITY-ST-ZIP	BOCA RATON FL 33432	
TITLE	DS	<input type="checkbox"/> Delete
NAME	ULLMAN, MICHAEL	
STREET ADDRESS	150 E PALMETTO PARK ROAD SUITE 650	
CITY-ST-ZIP	BOCA RATON FL 33432	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ullman, Howard F.	
STREET ADDRESS	150 East Palmetto Park Rd., Suite 650	
CITY-ST-ZIP	Boca Raton, FL 33432	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Howard F. Ullman*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 8, 2002 (561) 338-3535
 Date Daytime Phone #

CR2E034 (9/01)