

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90194 003 ***150.00

DOCUMENT # S98371

1. Entity Name
FLORIDA FACTOR AND FINANCE, INC.



Principal Place of Business
12674 LITTLE PALM LANE
BOCA RATON, FL 33428 US

Mailing Address
12674 LITTLE PALM LANE
BOCA RATON, FL 33428 US

2. Principal Place of Business
7789 CHARNEY LANE
Suite, Apt. #, etc.

3. Mailing Address
7789 CHARNEY LANE
Suite, Apt. #, etc.



04132004 Chg-P CR2E034 (10/03)

City & State
BOCA RATON FL
Zip
33496 Country
USA

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BOCA RATON FL
Zip
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USA

4. FEI Number
65-0304728 Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

ITZLER, DANIEL
12674 LITTLE PALM LANE
BOCA RATON, FL 33428

7. Name and Address of New Registered Agent

Name
ITZLER, DANIEL
Street Address (P.O. Box Number is Not Acceptable)
7789 CHARNEY LANE
City
BOCA RATON FL 33496

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Daniel Itzler* **DANIEL ITZLER** **4/25/04**
Signature, typed or printed name of registered agent (if title is applicable). (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ITZLER, DANIEL 12674 LITTLE PALM LANE BOCA RATON, FL 33428	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES ITZLER, DANIEL 7789 CHARNEY LANE BOCA RATON FL 33496	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Daniel Itzler* **Daniel Itzler** **4/25/04** **561 479-0642**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone *