2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V34818

FILED Apr 29, 2004 Secretary of State

Entity Name: ACCOUNTS RECEIVABLE PROFESSIONALS OF FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

2499 GLADES ROAD STE 101

BOCA RATON, FL 33431 US

Current Mailing Address: New Mailing Address:

10863 JAPONICA COURT 9725 NAPOLI WOODS LN BOCA RATON, FL 33498 DELRAY BEACH, FL 33446

FEI Number: 65-0339863 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STEVEN, GARELLEK 700 S FEDERAL HWY SUITE 200 BOCA RATON, FL 33432 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:

City-St-Zip:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD
 () Delete

 Name:
 MALHOTRA, THRITY

 Address:
 10863 JAPONICA COURT

 City-St-Zip:
 BOCA RATON, FL 33498

Title: STD () Delete
Name: MALHOTRA, SURINDAR
Address: 10863 JAPONICA COURT

BOCA RATON, FL 33498

Title: VPD () Delete
Name: MALHOTRA, CYRUS
Address: 10863 JAPONICA COURT
City-St-Zip: BOCA RATON, FL 33498

Title: PD (X) Change () Addition Name: MALHOTRA, THRITY

Name: MALHOTRA, THRITY
Address: 9725 NAPOLI WOODS LN
City-St-Zip: DELRAY BEACH, FL 33446

Title: STD (X) Change () Addition

Name: MALHOTRA, SURINDAR
Address: 9725 NAPOLI WOODS LN
City-St-Zip: DELRAY BEACH, FL 33446

Title: VPD (X) Change () Addition

 Name:
 MALHOTRA, CYRUS

 Address:
 9725 NAPOLI WOODS LN

 City-St-Zip:
 DELRAY BEACH, FL 33446

I hereby certify that the information supplied with this filing does not qualify for the 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 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: THRITY MALHOTRA PD 04/29/2004