

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000019407

FILED  
Jul 02, 2002 8:00 AM  
Secretary of State

Entity Name: E.S. FINANCIAL SERVICES, INC.

## Current Principal Place of Business:

999 BRICKELL AVENUE  
MIAMI, FL 33131

## New Principal Place of Business:

999 BRICKELL AVENUE  
TENTH FLOOR  
MIAMI, FL 33131

## Current Mailing Address:

999 BRICKELL AVENUE  
MIAMI, FL 33131

## New Mailing Address:

999 BRICKELL AVENUE  
TENTH FLOOR  
MIAMI, FL 33131

FEI Number: 65-0990143

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBERT W. STEWART, P.A.  
999 BRICKELL AVENUE  
SUITE 1006  
MIAMI, FL 33131

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: POPPE, NUNO  
Address: 999 BRICKELL AVENUE  
City-St-Zip: MIAMI, FL 33131

Title: D ( ) Delete  
Name: BALESTRA, VICTOR C  
Address: 999 BRICKELL AVENUE  
City-St-Zip: MIAMI, FL 33131

Title: D (X) Delete  
Name: MOLLET, BERNARD  
Address: 999 BRICKELL AVENUE  
City-St-Zip: MIAMI, FL 33131

Title: P ( ) Delete  
Name: MOLLET, BERNARD  
Address: 999 BRICKELL AVE  
City-St-Zip: MIAMI, FL 33131

Title: VP ( ) Delete  
Name: VENTURA, RICARDO  
Address: 999 BRICKELL AVENUE  
City-St-Zip: MIAMI, FL 33131

Title: D ( ) Delete  
Name: COTTER, WILLIAM  
Address: 999 BRICKELL AVENUE  
City-St-Zip: MIAMI, FL 33131

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: SVP (X) Change ( ) Addition  
Name: DAVIS, THOMPSON  
Address: 999 BRICKELL AVENUE  
City-St-Zip: MIAMI, FL 33131

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: NUNO POPPE

D

07/02/2002

Electronic Signature of Signing Officer or Director

Date