

2004 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Mar 11, 2004 8:00 am**  
**Secretary of State**

03-11-2004 90013 007 \*\*\*150.00

DOCUMENT # F98000001871

1. Entity Name  
BARTOLINI FINANCE CORPORATION



Principal Place of Business  
1850 E. MAIN ST.  
MESA, AZ 85203

Mailing Address  
1850 E. MAIN ST.  
MESA, AZ 85203



2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
2626 S FEDERAL HWY  
Suite, Apt. #, etc.

02252004 Chg-P CR2E034 (10/03)

City & State  
DELRAY BEACH, FL

4. FEI Number  
86-0812783

Applied For  
Not Applicable

Zip  
33483

Country  
U.S.A.

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

6. Name and Address of Current Registered Agent

BARTOLINI, ROBERT R  
2626 S. FEDERAL HWY.  
DELRAY BEACH, FL 33483

7. Name and Address of New Registered Agent

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

SIGNATURE \_\_\_\_\_ (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	S BARTOUNI, JAMES E 9290 E. THOMPSON PEAK PKWY #203 SCOTTSDALE, AZ 85255 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BARTOLINI, ROBERT R 9290 E. THOMPSON PEAK PKWY #203 SCOTTSDALE, AZ 85255 <input type="checkbox"/> Delete
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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	S BARTOLINI, JAMES E 9290 E THOMPSON PEAK PKWY #203 SCOTTSDALE, AZ 85255 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BARTOLINI, ROBERT R 9290 E THOMPSON PEAK PKWY #203 SCOTTSDALE, AZ 85255 <input checked="" 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: *(X) Robert R Bartolini* Date: *2/28/04* Davtime Phone #: *954-224-5334*