2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

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DOCUMENT # L02000025332

1. Entity Name FLASH MORTGAGE, LLC



Principal Place of Business

501 BRICKELL KEY DRIVE

SUITE 504 MIAMI, FL 33131

501 BRICKELL KEY DRIVE, SUITE 504

MIAMI, FL 33131

FILED Mar 19, 2007 08:00 AM Secretary of State



03142007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 82-0566505

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ROBINSON, WESLEY M 501 BRICKELL KEY DRIVE, SUITE 504 MIAMI, FL 33131

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The above named entity submits this statement for the purpose of characteristics of registered agent.	anging its registered office or registered agent, or both, in the	State of Florida. I am familiar with, and accept
Signature, typed or printed name of registered agent and bite if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2007		

MANAGING MEMBERS/MANAGERS TITLE **MGRM** ROBINSON, WESLEY M NAME STREET ADDRESS 501 BRICKELL KEY DRIVE, SUITE 504 CITY-ST-ZIP MIAMI, FL 33131 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP

U00000672471 03/28/07-80070-022 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

OR PRINTED NAME OF SIGNING MANAGUIG MEMBER, OR AUTHORIZED REPRESENTATIVE