2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

DOCUMENT# F01000006285

Entity Name: LOAN RESOURCE CENTER, INC.

Current Principal Place of Business:

7515 BERGENLINE AVE.
NORTH BERGEN, NJ 07047

New Principal Place of Business:

Current Mailing Address:

2721 EXECUTIVE PARK DRIVE
SUITE 2
WESTON, FL 33331

New Mailing Address:

FEI Number: 22-2898653 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HERRERA, ROBERT
1245 JASMINE CIRCLE
WESTON, FL 33326 US

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CPST ( ) Delete
Name: HERRERA, ROBERT
Address: 1245 JASMINE CIRCLE
City-St-Zip: WESTON, FL 33326

Title: V ( ) Delete
Name: HERRERA, GINA
Address: 1006 PINE BRANCH DRIVE
City-St-Zip: WESTON, FL 33326

Title: SVD ( ) Delete
Name: OROPESA, CARLO
Address: 7855 BLVD. EAST
City-St-Zip: NORTH BERGEN, NJ 07047

Title: D ( ) Delete
Name: HERRERA, ORVELIO
Address: 1006 PINE BRANCH DRIVE
City-St-Zip: WESTON, FL 33326

Title: D ( ) Delete
Name: ORTIZ, EVELYN
Address: 809 2ND AVE.
City-St-Zip: SECAUCUS, FL 07094

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change ( ) Addition
Name: HERRERA, GINA
Address: 1006 PINE BRANCH DRIVE
City-St-Zip: WESTON, FL 33326

Title: SVD (X) Change ( ) Addition
Name: OROPESA, CARLO
Address: 451 MORSE AVE
City-St-Zip: RIDGEFIELD, NJ 07657

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

Title: SVD (X) Change ( ) Addition
Name: ORTIZ, EVELYN
Address: 809 2ND AVE.
City-St-Zip: SECAUCUS, FL 07094

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ROBERT HERRERA PRES 04/24/2007

Electronic Signature of Signing Officer or Director — Date