2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F03000003777

Entity Name: CASHCALL, INC.

FILED Oct 13, 2005 Secretary of State

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

1920 MAIN STREET, E400 17360 BROOKHURST

IRVINE, CA 92614 FOUNTAIN VALLEY, CA 92704

Current Mailing Address: New Mailing Address:

1920 MAIN STREET, E400 17360 BROOKHURST

IRVINE, CA 92614 FOUNTAIN VALLEY, CA 92704

FEI Number: 33-0890858 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NRAI SERVICES, INC 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 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:

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

() Delete Title: (X) Change () Addition

Title: REDDAM, J. PAUL REDDAM, J. PAUL Name: Name: 1920 MAIN STREET, #400 17360 BROOKHURST Address: Address: City-St-Zip: IRVINE, CA 92614 City-St-Zip: FOUNTAIN VALLEY, CA 92704

Title: Title: () Delete (X) Change () Addition

Name: HOLLAND, HILARY Name: HOLLAND, HILARY 1920 MAIN STREET, #400 17360 BROOKHURST Address: Address:

IRVINE, CA 92614 FOUNTAIN VALLEY, CA 92704 City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition EMRICK, ELIZABETH EMRICK, ELIZABETH Name: Name:

1920 MAIN STREET, #400 17360 BROOKHURST Address: Address: City-St-Zip: IRVINE, CA 92614 City-St-Zip: FOUNTAIN VALLEY, CA 92704

Title: () Delete Title: (X) Change () Addition

MEEKS, DELBERT O MEEKS, DELBERT O Name: Name: Address: 1920 MAIN STREET #400 Address: 17360 BROOKHURST City-St-Zip: City-St-Zip: **IRVINE, CA 92614** FOUNTAIN VALLEY, CA 92704

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: DELBERT O. MEEKS 10/13/2005 Τ