2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001623

Entity Name: NATIONAL ONE CREDIT CORP.

FILED Jan 11, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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316 5TH AVENUE, SUITE 403 1230 AVENUE OF THE AMERICAS NEW YORK, NY 10001

7TH FI

NEW YORK, NY 10020

Current Mailing Address: New Mailing Address:

316 5TH AVENUE, SUITE 403 1230 AVENUE OF THE AMERICAS NEW YORK, NY 10001

7TH FL.

NEW YORK, NY 10020

FEI Number: 06-1739906 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 EXECUTIVÉ PARK DRIVE, SUITE 4 WESTON, FL 33331

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:

Address:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

184-21 AVON ROAD

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

MATTEN, ITAHY D MATTEN, ITAHY D Name: Name:

184-21 AVON ROAD 1230 AVENUE OF THE AMERICAS 7TH FL. Address: Address:

City-St-Zip: JAMAICA, NY 11432 City-St-Zip: NEW YORK, NY 10020

VTD Title: VTD (X) Change () Addition Title: () Delete Name: MATATYAHO, HANNA

Name: MATATYAHO, HANNA 84-50 AUSTIN ST. 6K Address:

JAMAICA, NY 11432 KEW GARDENS, NY 11415 City-St-Zip: City-St-Zip:

() Delete Title: Title: SD SD (X) Change () Addition MATTEN, ITAHY D MATTEN, ITAHY D Name: Name:

184-21 AVON RD 1230 AVENUE OF THE AMERICAS 7TH FL. Address: Address:

City-St-Zip: JAMAICA, NY 11432 City-St-Zip: NEW YORK, NY 10020

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

MATATYAHO, HANNA MATATYAHO, HANNA Name: Name: Address: 184-21 AVON ROAD Address: 84-50 AUSTIN ST. 6K City-St-Zip: City-St-Zip: JAMAICA, NY 11432 KEW GARDENS, NY 11415

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: ITAHY DAVID MATTEN PD 01/11/2007