

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G97490

FILED
Apr 19, 2006
Secretary of State

Entity Name: NILES ACCEPTANCE CORP.

Current Principal Place of Business:

1590 S. STATE RD 7
FT. LAUDERDALE, FL 33317 US

New Principal Place of Business:

Current Mailing Address:

1590 S STATE RD 7
FT LAUDERDALE, FL 33317 US

New Mailing Address:

FEI Number: 59-2398123 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLEIN, MITCHELL D
400 S DIXIE HWY #8
400 SOUTHGATE PROFESSIONAL CTR
HALLANDALE, FL 33009 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: ST () Delete
Name: SMYCZYNSKI, SYLVIA,
Address: 2710 NE 9TH COURT
City-St-Zip: POMPANO, BE

Title: P () Delete
Name: MASI, ANGELINA,
Address: 3300 NE 36TH STREET, #304
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: ST (X) Delete
Name: SMYCZYNSKI, SYLVIA
Address: 2710 NE 9TH CT
City-St-Zip: POMPANO BEACH, FL 330621

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST (X) Change () Addition
Name: SMYCZYNSKI, SYLVIA,
Address: 2710 NE 9TH COURT
City-St-Zip: POMPANO, FL 33062

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

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

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: SYLVIA SMYCZYNSKI

ST

04/19/2006

Electronic Signature of Signing Officer or Director

Date