


**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 27, 2008 08:00 AM**  
**Secretary of State**

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| <b>DOCUMENT # L04000090120</b><br>1. Entity Name<br><b>MORTGAGE MINT LLC</b> |  |
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|---|---|
| Principal Place of Business<br><b>6851 MILANI STREET<br/>LAKE WORTH, FL 33467</b> | Mailing Address<br><b>6851 MILANI STREET<br/>LAKE WORTH, FL 33467</b> |
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02252008 No Chg-LLC

CR2E083 (12/07)

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| 4. FEI Number<br><b>59-3793806</b>                        | Applied For<br>Not Applicable         |
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$5.00</b> Additional Fee Required |

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| 6. Name and Address of Current Registered Agent<br><br><b>WEISS, GERALD S MGRM<br/>6851 MILANI STREET<br/>LAKE WORTH, FL 33467</b> |
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| 8. 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. I am familiar with, and accept the obligations of registered agent.<br><br>SIGNATURE _____<br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____</small> |
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| <b>FILE NOW!!! FEE IS \$138.75<br/>After May 1, 2008 Fee will be \$538.75</b> |
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| 9. MANAGING MEMBERS/MANAGERS                   |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>MGRM<br/>WEISS, GERALD<br/>6851 MILANI STREET<br/>LAKE WORTH, FL 33467</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>MGRM<br/>WEISS, RANDI<br/>6851 MILANI STREET<br/>LAKE WORTH, FL 33467</b>  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |

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| <p>000000841290<br/>03/10/08-80011-004 138.75</p> <p><b>DO NOT WRITE<br/>IN THIS SPACE</b></p> |
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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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.<br><br><b>SIGNATURE: <i>Gerald Weiss</i> GERALD WEISS</b><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small> | <b>2/25/08</b><br><small>Date</small> | <b>561 433-1679</b><br><small>Daytime Phone #</small> |
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