2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 03, 2006
Secretary of State

DOCUMENT# L04000093582

Entity Name: R.E.A.L. LENDING AND MARKETING SERVICES LLC

Current Principal Place of Business:

4491 SOUTH STATE ROAD 7
#210
DAVIE, FL 33314

New Principal Place of Business:

P.O BOX 43-0775
MIAMI, FL 33243

Current Mailing Address:

1021 IVES DAIRY ROAD
111
MIAMI, FL 33179

New Mailing Address:

FEI Number: 20-2160814 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

LINDEMAN, JON B
P.O BOX 43-0775
MIAMI, FL 33243 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: LINDEMAN, EFYGENIA K
Address: 4491 SOUTH STATE ROAD 7 #210
City-St-Zip: DAVIE, FL 33314

Title: MGRM ( ) Delete
Name: ANTON, RAY
Address: 4491 SOUTH STATE RAOD 7, #210
City-St-Zip: DAVIE, FL 33314

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: LINDEMAN, EFYGENIA K
Address: P.O BOX 43-0775
City-St-Zip: MIAMI, FL 33243

Title: MGRM (X) Change ( ) Addition
Name: ANTON, RAY
Address: P.O BOX 43-0775
City-St-Zip: MIAMI, FL 33243

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 is true and accurate and that my electronic 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.

SIGNATURE: EFYGENIA K LINDEMAN MGRM 07/03/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date