

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000027151

FILED
Nov 20, 2007
Secretary of State

Entity Name: REAL BUSINESS LOANS, LLC

Current Principal Place of Business:

1354 WASHINGTON AVE
SUITE 220
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

4381 NW 167 ST
MIAMI GARDENS, FL 33055 US

Current Mailing Address:

4100 SW 194 TERR.
MIRAMAR, FL 33029 US

New Mailing Address:

FEI Number: 20-2520464 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FLEURY, GIOVANNI MR.
4381 NW 167 ST.
MIAMI GARDENS, FL 33055 US

Name and Address of New Registered Agent:

FLEURY, GIOVANNI MR.
4100 SW 194 TERR
MIRAMAR, FL 33029 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: GIOVANNI FLEURY

11/20/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: G-BELOT, MARIE T SR.
Address: 4100 SW 194 TERR.
City-St-Zip: MIRAMAR, FL 33029 US

Title: MGR () Delete
Name: FLEURY, GIOVANNI
Address: 4381 NW 167 ST
City-St-Zip: MIAMI GARDENS, FL 33055

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GIOVANNI, FLEURY MR.
Address: 4100 SW 194 TERR.
City-St-Zip: MIRAMAR, FL 33029 US

Title: MGR (X) Change () Addition
Name: TERESA, FLEURY MRS.
Address: 4100 SW 194 TERR
City-St-Zip: MIRAMAR, FL 33029

I hereby certify that the information supplied with this filing does not qualify 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: GIOVANNI FLEURY

MGRM

11/20/2007

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