

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000081936

FILED
Apr 08, 2008
Secretary of State

Entity Name: ABSOLUTE FLORIDA MORTGAGE LLC

Current Principal Place of Business:

6653 TANGLEWOOD BAY DR, 2114
ORLANDO, FL 32821 US

New Principal Place of Business:

Current Mailing Address:

6653 TANGLEWOOD BAY DR, 2114
ORLANDO, FL 32821 US

New Mailing Address:

FEI Number: 20-4750901

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAGEN, ELI
6341 EDGE O GROVE CIRCLE
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

MAGEN, ELI
6653 TANGLEWOOD BAY DRIVE, #2114
ORLANDO, FL 32821 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: _____

Electronic Signature of Registered Agent

04/08/2008

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MAGEN, ELI
Address: 6341 EDGE O GROVE CIRCLE
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MAGEN, ELI
Address: 6653 TANGLEWOOD BAY DRIVE, #2114
City-St-Zip: ORLANDO, FL 32821

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: ELI MAGEN

MNGR

04/08/2008

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