2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000073977

Entity Name: AMERITRUST FINANCE LLC

FILED Apr 15, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

12865 W. DIXIE HWY 12555 BISCAYNE BLVD. # 785

2ND FLOOR MIAMI, FL 33181 NORTH MIAMI, FL 33161

Current Mailing Address: New Mailing Address:

PO BOX 530926 12555 BISCAYNE BLVD. # 785

MIAMI, FL 33153 MIAMI, FL 33181

FEI Number: 56-2601381 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MICHAEL P CUDLIPP PA 12865 W. DIXIE HWY SECOND FLOOR NORTH MIAMI, FL 33161 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:

Date

ADDITIONS/CHANGES:

Electronic Signature of Registered Agent

MANAGING MEMBERS/MANAGERS:

MGRM () Delete Title: (X) Change () Addition

CUDLIPP, ANGELA CUDLIPP, ANGELA Name: Name: Address: PO BOX 530926 Address: 12555 BISCAYNE BLVD. # 785

City-St-Zip: MIAMI, FL 33153 City-St-Zip: MIAMI, FL 33181

(X) Change () Addition Title: MGR () Delete Title: MGR CUDLIPP, KEVIN

Name: Name: CUDLIPP, KEVIN Address: PO BOX 530926 Address: 12555 BISCAYNE BLVD. # 785

City-St-Zip: MIAMI, FL 33153 City-St-Zip: MIAMI, FL 33181

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: ANGELA CUDLIPP **MGRM** 04/15/2009