

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000110085

FILED
Jun 23, 2007
Secretary of State

Entity Name: NEWPORT FLORIDA LENDING, LLC

Current Principal Place of Business:

8900 S.W. 117 AVENUE, SUITE C-205
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

8900 S.W. 117 AVENUE, SUITE C-205
MIAMI, FL 33186

New Mailing Address:

FEI Number: 20-5899425 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

RODRIGUEZ, LUIS M
8900 S.W. 117 AVENUE, SUITE C-205
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

RODRIGUEZ, LUIS M
8900 S.W. 117 AVENUE, SUITE C-205
MIAMI, FL 33186 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: LUIS M RODRIGUEZ

06/23/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RODRIGUEZ, LUIS M
Address: 8900 S.W. 117 AVENUE, SUITE C-205
City-St-Zip: MIAMI, FL 33186

Title: MGRM () Delete
Name: RODRIGUEZ, ALICIA S
Address: 8900 S.W. 117 AVENUE, SUITE C-205
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LUIS M RODRIGUEZ

MGRM

06/23/2007

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