

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000002870

Entity Name: MLC LENDING, LLC

FILED
Jul 06, 2007
Secretary of State

Current Principal Place of Business:

256-3 ISLAND BLVD STE 301
HALLANDALE BEACH, FL 33009

New Principal Place of Business:

6108 MIRAMAR PARKWAY
MIRAMAR, FL 33023

Current Mailing Address:

256-3 ISLAND BLVD STE 301
HALLANDALE BEACH, FL 33009

New Mailing Address:

6108 MIRAMAR PARKWAY
MIRAMAR, FL 33023

FEI Number: 20-4219534 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:

CARAYOL, MOSES
256-3 ISLAND BLVD STE 301
HALLANDALE BEACH, FL 33009 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: CARAYOL, MOSES
Address: 256-3 ISLAND BLVD STE 301
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: MGRM () Delete
Name: LEDDA, JEANETTE
Address: 256-3 ISLAND BLVD STE 301
City-St-Zip: HALLANDALE BEACH, FL 33009

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: JEANETTE LEDDA

MS

07/06/2007

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