

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000039239

FILED
Jul 06, 2007
Secretary of State

Entity Name: STUDENT LOAN CONSOLIDATORS, INC.

Current Principal Place of Business:

3603 S.W. 25TH ST.
MIAMI, FL 33133

New Principal Place of Business:

200 S. BISCAYNE BLVD.
SUITE 3800
MIAMI, FL 33131

Current Mailing Address:

PO BOX 014555
MIAMI, FL 33101

New Mailing Address:

FEI Number: 65-0999659

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TERCILLA, CARMEN A
3603 S.W. 25TH ST.
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

TERCILLA, CARMEN A
415 ALMERIA AVE
CORAL GABLES, FL 33134 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: CARMEN A TERCILLA

07/06/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TERCILLA, CARMEN
Address: 3603 SW 26TH STREET
City-St-Zip: MIAMI, FL 33133

Title: T () Delete
Name: TERCILLA, JOSE
Address: 3603 SW 26TH ST
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: TERCILLA, CARMEN
Address: 415 ALMERIA AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: T (X) Change () Addition
Name: TERCILLA, JOSE
Address: 415 ALMERIA AVE
City-St-Zip: CORAL GABLES, FL 33134

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARMEN A TERCILLA

PD

07/06/2007

Electronic Signature of Signing Officer or Director

Date