

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P00000082288

**FILED**  
**May 19, 2008**  
**Secretary of State****Entity Name:** CAROUSEL MORTGAGE LOAN, CORP.**Current Principal Place of Business:**8057 NW 155 STREET  
MIAMI LAKES, FL 33016**New Principal Place of Business:****Current Mailing Address:**8057 NW 155 ST  
MIAMI LAKES, FL 33016**New Mailing Address:****FEI Number:** 65-1036307**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**AMADOR, YIZEL  
8057 NW 155 STREET  
MIAMI LAKES, FL 33016 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**OFFICERS AND DIRECTORS:****Title:** PD ( ) Delete  
**Name:** AMADOR, YIZEL  
**Address:** 8057 NW 155 STREET  
**City-St-Zip:** MIAMI LAKES, FL 33016**Title:** VP (X) Delete  
**Name:** MARTIN, CARLOS A  
**Address:** 8057 NW 155 ST  
**City-St-Zip:** MIAMI LAKES, FL 33016**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****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 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: YIZEL AMADOR

P

05/19/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director\_\_\_\_\_  
Date