

## **2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000074504

Entity Name: MEG LENDING GROUP, INC.

**FILED**  
**Nov 13, 2008**  
**Secretary of State**

### **Current Principal Place of Business:**

231 LAKEVIEW DRIVE  
CORAL SPRINGS, FL 33071

### **New Principal Place of Business:**

111 SE 7TH AVE  
POMPAÑO BEACH, FL 33060

### **Current Mailing Address:**

231 LAKEVIEW DRIVE  
CORAL SPRINGS, FL 33071

### **New Mailing Address:**

111 SE 7TH AVE  
POMPAÑO BEACH, FL 33060

FEI Number: 26-3709198

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

### **Name and Address of Current Registered Agent:**

GONZALEZ, MARIAN E  
231 LAKEVIEW DRIVE  
CORAL SPRINGS, FL 33071 US

### **Name and Address of New Registered Agent:**

GONZALEZ, MARIAN E  
111 SE 7TH AVE  
POMPAÑO BEACH, FL 33060 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: MARIAN E GONZALEZ

11/13/2008

Electronic Signature of Registered Agent

Date

### **OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GONZALEZ, MARIAN E  
Address: 231 LAKEVIEW DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33071

### **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: MARIAN E GONZALEZ

PVPT

11/13/2008

Electronic Signature of Signing Officer or Director

Date