## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000070478

City-St-Zip:

FILED Jan 09, 2006 Secretary of State

Entity Nai	me: NEW HC	RIZONS LENDING GROUP IN	NC.		
Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
416 N.W. 58TH AVENUE MIAMI, FL 33126			815 NW 57 AVE SUITE 119 MIAMI, FL 33126	SUITE 119	
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
815 NW 57 SUITE119 MIAMI, FL					
FEI Number:	: 20-1083087	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	l Address of (	Current Registered Agent:	Name and Address	of New Registered Agent:	
815 NW 57 SUIT 119	YOSVANY 7 AVE 33126 US				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its register	red office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution (X).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip: Title:	ACOSTA, YOS 416 N.W. 58TH MIAMI, FL 331	I AVENUE	*	(X) Change ( ) Addition YOSVANY CKELL AVE APT 703  2 33129  ( ) Change ( ) Addition	
Name: Address: City-St-Zip:	HIDALGO, OD/ 416 N.W. 58TH MIAMI, FL 331	ALIS I AVENUE	Name: Address: City-St-Zip:	( ) Sharige ( ) Addition	
Title: Name: Address: City-St-Zip:	(	) Delete		( ) Change (X) Addition , FARELO VICEPRE ISET DR # 235B <sub>-</sub> 33173	
Title: Name:	(	) Delete	Title: V Name: JORGE, 1 Address: 2760 SW	( ) Change (X) Addition TABARES VICEPRE 14 ST	

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip: MIAMI, FL 33145

SIGNATURE: YOSVANY ACOSTA Ρ 01/09/2006