

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000073408

Entity Name: CENTRAL LENDING, INC.

FILED
May 06, 2005
Secretary of State

Current Principal Place of Business:

1500 NE 127TH STREET
STE 204
NORTH MIAMI, FL 33161

New Principal Place of Business:

2880 W. OAKLAND PARK BLVD
STE 101
OAKLAND PARK, FL 33311

Current Mailing Address:

1500 NE 127TH STREET
STE 204
NORTH MIAMI, FL 33161

New Mailing Address:

2880 W. OAKLAND PARK BLVD
STE 101
OAKLAND PARK, FL 33311

FEI Number: 20-1171298

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAINT-PREUX, JOUVET
1500 NE 127TH ST
STE 204
NORTH MIAMI, FL 33161 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

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: P () Delete
Name: SAINT-PREUX, JOUVET
Address: 1500 NE 127TH ST, STE 204
City-St-Zip: NORTH MIAMI, FL 33161

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 for the exemption stated in Section 119.07(3)(i), 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: JOUVET SAINT-PREUX

P

05/06/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date