

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 16, 2005 8:00 am
Secretary of State

05-16-2005 90198 045 ***158.75

DOCUMENT # P04000076529					
1. Entity Name PEGASUS LENDING INC.					
Principal Place of Business 1840 SW 22ND STREET SUITE 102 CORAL GABLES, FL 33145			Mailing Address 1840 SW 22ND STREET SUITE 102 CORAL GABLES, FL 33145		
2. Principal Place of Business		3. Mailing Address 1840 SW 22ND STREET Suite #102			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		Coral Gables, Florida			
Zip	Country	33145	State	4. FEI Number 57-1205438	
5. Certificate of Status Desired				Applied For Not Applicable	
6. Name and Address of Current Registered Agent PALENZUELA, MARIANO 10221 SW 86 AVE MIAMI, FL 33176				7. Name and Address of New Registered Agent	
Name				Street Address (P.O. Box Number is Not Acceptable)	
City				FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PALENZUELA, MARIANO 10221 SW 86 AVE MIAMI, FL 33176	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PALENZUELA, MARIANO 10221 SW 86 AVE MIAMI, FL 33176	☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PALENZUELA, MARIANO 10221 SW 86 AVE MIAMI, FL 33176	☐ Change ☐ Addition			
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: <i>Mariano Palenzuela</i>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					