
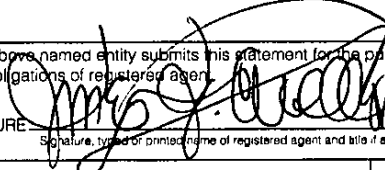
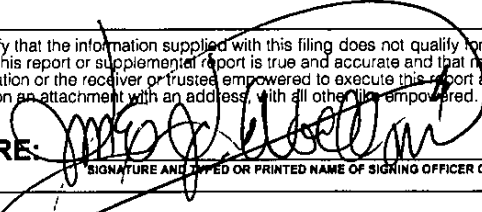


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 26, 2007 08:00 AM
Secretary of State

DOCUMENT # P04000085880		
1. Entity Name LIBERTY LOANS, INC		
Principal Place of Business 12701 S JOHN YOUNG PKWY STE 214 ORLANDO, FL 32837		Mailing Address 12701 S JOHN YOUNG PKWY STE 214 ORLANDO, FL 32837
DO NOT WRITE IN THIS SPACE		
		03202007 No Chg-P CR2E034 (11/05)
4. FEI Number 20-1191533		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		
AVELLAN, JAIME J 12506 BRAXTED DRIVE ORLANDO, FL 32837		DO NOT WRITE IN THIS SPACE
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:  Jaime Avellan 03-20-2007 <small>(NOTE: Registered Agent signature required when reinstating)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P AVELLAN, JAIME J 12506 BRAXTED DRIVE ORLANDO, FL 32837	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP AVELLAN, JULIA M 12506 BRAXTED DRIVE ORLANDO, FL 32837	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T AVELLAN, JULIA M 12506 BRAXTED DRIVE ORLANDO, FL 32837	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S AVELLAN, JAIME J 12506 BRAXTED DRIVE ORLANDO, FL 32837	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  Jaime Avellan		03-20-07 Date Daytime Phone #