

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000163803

FILED  
Jan 30, 2006  
Secretary of State

Entity Name: INTERNATIONAL FINANCIAL LENDING, INC.

**Current Principal Place of Business:**

10441 NW 21 STREET  
PEMBROKE PINES, FL 33024 US

**New Principal Place of Business:**

**Current Mailing Address:**

10441 NW 21 STREET  
PEMBROKE PINES, FL 33024 US

**New Mailing Address:**

FEI Number: 20-1961799

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ATHENS FINANCIAL SERVICES, LLC  
915 NE 125TH STREET  
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: NEIL B. RUSSELL

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: BOLIVAR, CLAUDIA  
Address: 10441 NW 21 STREET  
City-St-Zip: PEMBROKE PINES, FL 33161 US

Title: VP ( ) Delete  
Name: ALMONTE, JUAN  
Address: 511 N 74TH AVENUE  
City-St-Zip: HOLLYWOOD, FL 33024 US

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

Title: P (X) Change ( ) Addition  
Name: BOLIVAR, CLAUDIA M  
Address: 10441 NW 21 STREET  
City-St-Zip: PEMBROKE PINES, FL 33026 US

Title: VP (X) Change ( ) Addition  
Name: ALMONTE, JUAN F  
Address: 511 N 74TH AVENUE  
City-St-Zip: HOLLYWOOD, FL 33024 US

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.

SIGNATURE: CLAUDIA M. BOLIVAR

PRES

01/30/2006

Electronic Signature of Signing Officer or Director

Date