

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000082351

FILED  
Apr 24, 2007  
Secretary of State

Entity Name: LOAN CLOSING SCHOOL OF SOUTH FLORIDA, INC.

## Current Principal Place of Business:

182 S.W. 204 AVE.  
PEMBROKE PINES, FL 33029

## New Principal Place of Business:

182 SW 204TH AVENUE  
PEMBROKE PINES, FL 33029

## Current Mailing Address:

182 S.W. 204 AVE.  
PEMBROKE PINES, FL 33029

## New Mailing Address:

182 SW 204TH AVENUE  
PEMBROKE PINES, FL 33029

FEI Number: 20-5641874

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ORTIZ, ANGEL L  
2487 CENTERGATE DRIVE, SUITE 201  
MIRAMAR, FL 33025 US

## Name and Address of New Registered Agent:

ORTIZ, ANGEL L  
182 SW 204TH AVENUE  
PEMBROKE PINES, FL 33029 US

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:

04/24/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete  
Name: ORTIZ, ANGEL L  
Address: 2487 CENTERGATE DRIVE, SUITE 201  
City-St-Zip: MIRAMAR, FL 33025

Title: VP/T ( ) Delete  
Name: ORTIZ, ANGEL  
Address: 2487 CENTERGATE DRIVE, SUITE 201  
City-St-Zip: MIRAMAR, FL 33025

Title: S (X) Delete  
Name: ORTIZ, ANGEL L  
Address: 2487 CENTERGATE DRIVE, SUITE 201  
City-St-Zip: MIRAMAR, FL 33025

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: ORTIZ, ANGEL L II  
Address: 182 SW 204TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: CFO (X) Change ( ) Addition  
Name: ORTIZ, LYDIA  
Address: 182 SW 204TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33029

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 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: LYDIA ORTIZ

CFO

04/24/2007

Electronic Signature of Signing Officer or Director

Date