2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000077941

Entity Name: FIRST NATION FINANCE INC

FILED May 10, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

370 CAMINO GARDENS BLVD 1170 SW 17TH STREET BOCA RATON, FL 33486

BOCA RATON, FL 33432

Current Mailing Address: New Mailing Address:

370 CAMINO GARDENS BLVD 1170 SW 17TH STREET BOCA RATON, FL 33486

BOCA RATON, FL 33432

FEI Number: 56-2592432 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FURTADO, JOAO S SR

3351 NE 5TH AVE

BOCA RATON, FL 33431 US

ALMEIDA, THARCILA A
1170 SW 17TH STREET
BOCA RATON, FL 33486 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: THARCILA A ALMEIDA 05/10/2007

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: D (X) Change () Addition

 Name:
 FURTADO, JOAO S
 Name:
 ALMEIDA, THARCILA A

 Address:
 3351 NE 5TH AVE
 Address:
 P.O. BOX 5162

City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: DEERFIELD BEACH, FL 33442

Title: VP () Delete Title: D (X) Change () Addition Name: ALMEIDA, THARCILA A Name: ANTUNES, MARCELLO C

 Name:
 ALMEIDA, THARCILA A
 Name:
 ANTUNES, MARCELLO C

 Address:
 PO BOX 5162
 Address:
 4706 SW 13TH ST

City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip: DEERFIELD BEACH, FL 33442

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 FURTADO, JOÃO S

 Address:
 Address:
 3351 NE 5TH AVE

 City-St-Zip:
 City-St-Zip:
 BOCA RATON, FL 33431

I hereby certify that the information supplied with this filing does not qualify 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: THARCILA A ALMEIDA D 05/10/2007