

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000088686

FILED  
Apr 21, 2008  
Secretary of State

Entity Name: OPTIMUM LENDING GROUP, INC.

## Current Principal Place of Business:

7711 N. MILITARY TRAIL  
PALM BCH GARDENS, FL 33410

## New Principal Place of Business:

319 CLEMATIS STREET STE 301  
WEST PALM BEACH, FL 33401

## Current Mailing Address:

7711 N. MILITARY TRAIL  
PALM BCH GARDENS, FL 33410

## New Mailing Address:

319 CLEMATIS STREET STE 301  
WEST PALM BEACH, FL 33401

FEI Number: 20-5148332

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ERCOLANO, LISA  
8042 VIA HACIENDA  
PALM BCH GARDENS, FL 33418 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ERCOLANO, LISA  
Address: 7711 N. MILITARY TRAIL  
City-St-Zip: PALM BCH GARDENS, FL 33410

Title: VD ( ) Delete  
Name: ERCOLANO, GREGON  
Address: 7711 N. MILITARY TRAIL  
City-St-Zip: PALM BCH GARDENS, FL 33410

Title: D ( ) Delete  
Name: RAYMOND, NATHANIEL  
Address: 7711 N. MILITARY TRAIL  
City-St-Zip: PALM BCH GARDENS, FL 33410

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: ERCOLANO, LISA  
Address: 319 CLEMATIS STREET STE 301  
City-St-Zip: WEST PALM BCH, FL 33401

Title: VD (X) Change ( ) Addition  
Name: ERCOLANO, GREGORY  
Address: 319 CLEMATIS STREET STE 301  
City-St-Zip: WEST PALM BCH, FL 33401

Title: D (X) Change ( ) Addition  
Name: RAYMOND, NATHANIEL  
Address: 319 CLEMATIS STREET STE 301  
City-St-Zip: WEST PALM BCH, FL 33401

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: LISA ERCOLANO

PD

04/21/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date