## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000128464

Entity Name: NATIONWIDE LENDING SOLUTIONS USA INC

FILED May 01, 2009 Secretary of State

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Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
6700 CONROY WINDERMERE RD STE 220 ORLANDO, FL 32835			STE 322	7065 WESTPOINTE BLVD STE 322 ORLANDO, FL 32835	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	ITE VENEZIA I ), FL 32836	OR			
FEI Number: 26-1508375 FEI Number Applied For ( ) FEI		FEI Number Not Applicable ( )	Certificate of Status Desired ( )		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
7637 POIN ORLANDO The above	NDE, STEVEN ITE VENEZIA I ), FL 32836 named entity se of Florida.	US	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATU	RE:				
	Electror	ic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution (  ).	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP ( ) BAHAMONDE, 7637 POINTE \ ORLANDO, FL	ENEZIA DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CEO ( ) BAHAMONDE, 7637 POINTE V ORLANDO, FL	ENEZIA DR	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: STEVEN BAHAMONDE DP 05/01/2009