

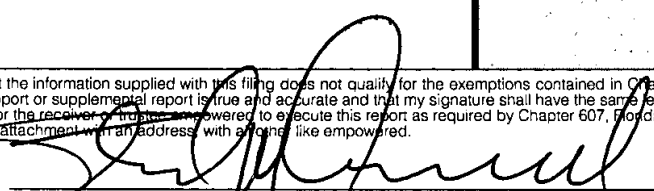


Jan 29,  
Seci

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

<b>DOCUMENT # P95000080399</b>		
1. Entity Name NORTHEAST FUNDING CORPORATION		
Principal Place of Business 2231 NE 25 AVE #1 POMPANO BEACH, FL 33062 US		Mailing Address 2231 NE 25 AVE #1 POMPANO BEACH, FL 33062 US
<b>DO NOT WRITE IN THIS SPACE</b>		
		01222007 No Chg-P CR2E034 (11/05)
		4. FEI Number 65-0624666
		Applied For Not Applicable
		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		
CONNELL, EDWARD M 2231 NE 25 AVE #1 POMPANO BEACH, FL 33062		<b>DO NOT WRITE IN THIS SPACE</b>
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____		
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
		000000607243 01/31/07-80029-015 158.75
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CONNELL, EDWARD M 2940 NE 22ND CT POMPANO BCH, FL 33062	
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<b>DO NOT WRITE IN THIS SPACE</b>		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with someone like empowered.		
SIGNATURE:  1/25/07 (954) 782-3077		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		