2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000048516

Entity Name: RAPID LIEN VERIFICATIONS INC.

FILED Feb 13, 2007 Secretary of State

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

2701 LEJEUNE RD. 1080 SW 25 AVE # 405 #

CORAL GABLES, FL 33134 MIAMI, FL 33135

Current Mailing Address: New Mailing Address:

10250 SW 56 STREET PO BOX 145127

A-102 CORAL GABLES, FL 33114 MIAMI, FL 33165

FEI Number: 65-0766519 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:

SARDINA, GUSTAVO
2701 LEJEUNE RD.
#405

SARDINA, GUSTAVO
1080 SW 25 AVE
MIAMI, FL 33135 US

#405 MIAMI, FL 33135 U CORAL GABLES, FL 33134 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: GUSTAVO SARDINA 02/13/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 SARDINA, GUSTAVO
 Name:
 SARDINA, GUSTAVO

 Address:
 2701 LEJEUNE RD. #405
 Address:
 PO BOX 145127

 City-St-Zip:
 CORAL GABLES, FL 33134
 City-St-Zip:
 MIAMI, FL 33114

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: GUSTAVO SARDINA PRES 02/13/2007