

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000046669

FILED
Sep 20, 2007
Secretary of State

Entity Name: MUTUALOAN CORPORATION

Current Principal Place of Business:

7695 S.W. 104TH, STE. 210
MIAMI, FL 33156

New Principal Place of Business:

222 LAKEVIEW AVE.
STE. 1903
WEST PALM BEACH, FL 33401

Current Mailing Address:

7695 S.W. 104TH, STE. 210
MIAMI, FL 33156

New Mailing Address:

222 LAKEVIEW AVE.
STE. 1903
WEST PALM BEACH, FL 33401

FEI Number: 65-1001562

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LITTMAN, ERIC
7695 S.W. 104TH, STE. 210
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

JENNINGS, DAVID
222 LAKEVIEW AVE.
WEST PALM BEACH, FL 33401 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: DAVID JENNINGS

09/20/2007

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:

Title: DP () Delete
Name: LITTMAN, ERIC P
Address: 7695 S.W. 104TH, STE. 210
City-St-Zip: MIAMI, FL 33156

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: JENNINGS, DAVID
Address: 222 LAKEVIEW AVE.
City-St-Zip: WEST PALM BEACH, FL 33401

Title: DR () Change (X) Addition
Name: TOMPAKOV, BRIAN
Address: 4860 PALM BROOKE TERRACE
City-St-Zip: WEST PALM BEACH, FL 33417

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: DAVID JENNINGS

DR

09/20/2007

Electronic Signature of Signing Officer or Director

Date