

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Oct 23, 2007
Secretary of State**

DOCUMENT# S91288

Entity Name: PLAZA FINANCE CORP.

Current Principal Place of Business:

3848 W. 16 AVE
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4781
MIAMI LAKES, FL 33014

New Mailing Address:

FEI Number: 65-0293897 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DON, FRANK J.
3848 W. 16 AVE
HIALEAH, FL 33012 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FRANK, DON J
Address: 16120 KINGSMOON WAY
City-St-Zip: MIAMI LKS, FL 33014

Title: STD () Delete
Name: ROSITA, DON
Address: 16120 KINGSMOON WAY
City-St-Zip: MIAMI LKS, FL 33014

Title: VP (X) Delete
Name: DON, KRISTY R
Address: 16120 KINGSMOOR WAY
City-St-Zip: MIAMI LAKES, FL 33014

Title: VP (X) Delete
Name: DON, FRANK A
Address: 16120 KINGSMOOR WAY
City-St-Zip: MIAMI LAKES, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROSITA DON

STD

10/23/2007

Electronic Signature of Signing Officer or Director

_____ Date