No. C 139641		Due no later than Jun 30, 2014		2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 USA 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		1. Mailing Address: Correct in this box if needed.					
		IMMEDIATE CREDIT RECOVERY, INC. DEBRA FLORIO 169 MYERS CORNERS ROAD SUITE 110 WAPPINGERS FALLS NY 12590 USA					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code
DIRECTOR	EFRAIM ROA	4	169 MYERS CORNERS ROAD	Wappingers Falls	NY	USA	12590
PRESIDENT	FELIPE YANES		3330 CHASTAIN MEADOWS PARKWAY SUITE 100	KENNESAW	GA	USA	30144
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
NY C 139641		Signature: Efraim Roa		Date: 05/27/2014			
		Name (type or print): Efraim Roa		Title: Ceo			
Processed 05/27/20	014	* Electronically provided	signatures are accepted as original signa	atures.			