

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005615

FILED  
May 01, 2008  
Secretary of State

Entity Name: ENCORE FINANCIAL SERVICES GROUP, INC.

**Current Principal Place of Business:**

1818 S. AUSTRALIAN AVENUE #450  
WEST PALM BEACH, FL 33409

**New Principal Place of Business:**

**Current Mailing Address:**

1818 S. AUSTRALIAN AVENUE #450  
WEST PALM BEACH, FL 33409

**New Mailing Address:**

FEI Number: 65-1046684

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 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

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: SDCE ( ) Delete  
Name: SHAPIRO, ROBIN  
Address: 111 WEST 89TH STREET # GA  
City-St-Zip: NEW YORK, NY 10024

Title: PD ( ) Delete  
Name: GROSSMAN, HAROLD  
Address: 7204 CARMEL COURT  
City-St-Zip: BOCA RATON, FL 33433

Title: DT ( ) Delete  
Name: LOWE, CHARLES  
Address: 3 BROADMOOR DRIVE  
City-St-Zip: RUMSON, NJ 07760

Title: CFO (X) Delete  
Name: LOWE, CHARLES  
Address: 1818 S AUSTRALIAN AVE - #450  
City-St-Zip: WEST PALM BEACH, FL 33409

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

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

Title: CFO (X) Change ( ) Addition  
Name: LOWE, CHARLES  
Address: 1818 SOUTH AUSTRALIAN AVENUE, #450  
City-St-Zip: WEST PALM BEACH, FL 33409

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: CHARLES LOWE

CFO

05/01/2008

Electronic Signature of Signing Officer or Director

Date