

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005615

FILED
Apr 28, 2009
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

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

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

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:

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: MELISSA BELLUCCIO, CONTROLLER

CONT

04/28/2009

Electronic Signature of Signing Officer or Director

Date