

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000007220

FILED
Mar 02, 2010
Secretary of State

Entity Name: T&H BROKERS INC.

Current Principal Place of Business:

320 W. 57TH STREET
NEW YORK, NY 10019

New Principal Place of Business:

Current Mailing Address:

320 W. 57TH STREET
NEW YORK, NY 10019

New Mailing Address:

FEI Number: 20-3833082 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: V/S
Name: JOHANNES, CLOETE L
Address: 320 WEST 57TH STREET
City-St-Zip: NEW YORK, NY 10019 US

Title: VP
Name: RANDA, GOBERMAN
Address: 320 WEST 57TH STREET
City-St-Zip: NEW YORK, NY 10019 US

Title: CEO
Name: HARRIS, WALTER L
Address: 320 WEST 57TH STREET
City-St-Zip: NEW YORK, NY 10019 US

Title: VP
Name: MANNINO, JAMES V
Address: 320 WEST 57TH STREET
City-St-Zip: NEW YORK, NY 10019 US

Title: D
Name: RICHARD, FERRUCCI F
Address: 320 WEST 57TH STREET
City-St-Zip: NEW YORK, NY 10019 US

Title: P/D
Name: RICHARD, FLEDER J
Address: 320 WEST 57TH STREET
City-St-Zip: NEW YORK, NY 10019 US

I hereby 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 all other like empowered.

SIGNATURE: JOHANNES CLOETE

V/S

03/02/2010

Electronic Signature of Signing Officer or Director

_____ Date