

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000006179

FILED  
Jul 08, 2009  
Secretary of State

Entity Name: CONSTRUCTION INSURANCE BROKERS CORP.

## Current Principal Place of Business:

C/O TANENBAUM-HARBER CO. HOLDINGS, INC.  
320 W 57TH STREET  
NEW YORK, NY 10019

## New Principal Place of Business:

C/O T&H GROUP INC.  
320 W 57TH STREET  
NEW YORK, NY 10019

## Current Mailing Address:

C/O TANENBAUM-HARBER CO. HOLDINGS, INC.  
320 W 57TH STREET  
NEW YORK, NY 10019

## New Mailing Address:

C/O T&H GROUP INC.  
320 W 57TH STREET  
NEW YORK, NY 10019

FEI Number: 26-1570093

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 DR., STE 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: DP ( ) Delete  
Name: HARRIS, WALTER  
Address: 320 W 57TH STREET  
City-St-Zip: NEW YORK, NY 10019 NY

Title: DV ( ) Delete  
Name: JOHANNES, CLOETE  
Address: 320 W 57TH STREET  
City-St-Zip: NEW YORK, NY 10019

Title: V ( ) Delete  
Name: CONGELIO, JAMES  
Address: 320 W 57TH STREET  
City-St-Zip: NEW YORK, NY 10019 NY

Title: V ( ) Delete  
Name: LUBRANO III, THOMAS  
Address: 320 WEST 57TH STREET  
City-St-Zip: NEW YORK, NY 10019 NY

Title: V ( ) Delete  
Name: BULLARD, ANN  
Address: 320 WEST 57TH STREET  
City-St-Zip: NEW YORK, NY 10019 NY

## 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:

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: JOHANNES CLOETE

SVP

07/08/2009

Electronic Signature of Signing Officer or Director

Date