

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F08000000019

FILED
Oct 21, 2009
Secretary of State

Entity Name: BRAVER, STERN SECURITIES CORP.

Current Principal Place of Business:

641 LEXINGTON AVENUE
NEW YORK, NY 10022

New Principal Place of Business:

725 FIFTH AVENUE
22ND FLOOR
NEW YORK, NY 10022

Current Mailing Address:

641 LEXINGTON AVENUE
NEW YORK, NY 10022

New Mailing Address:

725 FIFTH AVENUE
22ND FLOOR
NEW YORK, NY 10022

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: DONNA MOCK

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CHRM () Delete
Name: STERN, STEVEN
Address: 760 PARK AVENUE
City-St-Zip: NEW YORK, NY 30021

Title: V () Delete
Name: STERN, STEVEN
Address: 760 PARK AVENUE
City-St-Zip: NEW YORK, NY 30021

Title: P () Delete
Name: BRAVER, DAVID
Address: 4 EAST 72ND STREET
City-St-Zip: NEW YORK, NY 10021

Title: ST (X) Delete
Name: LUPO, FRANK
Address: 53 TOPAZ DRIVE
City-St-Zip: FREEHOLD, NJ 07728

Title: CFO (X) Delete
Name: LUPO, FRANK
Address: 53 TOPAZ DRIVE
City-St-Zip: FREEHOLD, NJ 07728

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: STERN, STEVEN
Address: 725 FIFTH AVENUE, 22ND FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: VP (X) Change () Addition
Name: MORRISON, SUZANNE
Address: 725 FIFTH AVENUE, 22ND FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: CFO (X) Change () Addition
Name: LUPO, FRANK
Address: 725 FIFTH AVENUE, 22ND FLOOR
City-St-Zip: NEW YORK, NY 10022

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: SUZANNE MORRISON

VP

10/21/2009

Electronic Signature of Signing Officer or Director

Date