2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H05846

City-St-Zip:

JUPITER, FL

Entity Name: J/T BROKERS GROUP, INC.

FILED Apr 28, 2009 Secretary of State

| Current Principal Place of Business: | | | New Principal Place o | New Principal Place of Business: | |
|---|--|----------------------------------|---|--|--|
| 129 CENT JUPITER, | | JS | | | |
| Current Mailing Address: | | | New Mailing Address | New Mailing Address: | |
| 129 CENT JUPITER, | =: : : : : | IS | | | |
| FEI Number | : 59-2441900 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of | Name and Address of New Registered Agent: | |
| 129 CENT | | JS | | | |
| | e named entity s e of Florida. | submits this statement for the p | ourpose of changing its registered | office or registered agent, or both, | |
| SIGNATUI | RE: | | | | |
| | Electron | ic Signature of Registered Age | ent | Date | |
| Election Car | mpaign Financing | Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | PD () COFFEY. PAME 6168 EAGLES N JUPITER, FL | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | VPT () LONG, DOUGLA 3064 MAINSAIL JUPITER, FL 3 | CIRCLE | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: | D () COFFEY, JEFF 258 SUSSEX C | | Title: Name: Address: | () Change () Addition | |

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.

City-St-Zip:

SIGNATURE: PAMELA B. COFFEY PD 04/28/2009