

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P00000098225

1. Entity Name
**EXECUTIVE BUSINESS RESOURCES FINANCIAL
GROUP, CORP.**



FILED

03 MAR 12 PM 12:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



☒ CHECK HERE IF MAKING CHANGES

03

Principal Place of Business
42 S.W. 34TH AVENUE
MIAMI, FL 33135

Mailing Address
42 S.W. 34TH AVENUE
MIAMI, FL 33135

2. Principal Place of Business
50 SW 34 AVE

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SAME

City & State
MIAMI

City & State

4. FEI Number
85-1096307

Applied For
Not Applicable

Zip
FLORIDA

Country
DADE

Zip
33135

Country
USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AMADO, JESUS H BR.CPA
42 S.W. 34TH AVENUE
MIAMI, FL 33135

Name
YISHAI HAYDELSTEIN - AMADO
Street Address (P.O. Box Number, if not Applicable)
50 SW 34 AVE
City
MIAMI FL Zip Code
33135

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]

3/10/03

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD AMADO, ELIZABETH V 426 SW 34TH AVE MIAMI, FL 33135 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD AMADO, JESUS H SR 42 S.W. 34TH AVENUE MIAMI, FL 33135 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JESUS H AMADO SR 42 SW 34 AVE, MIAMI FL 33135 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD YISHAI HAYDELSTEIN - AMADO 50 SW 34 AVE, MIAMI, FL 33135 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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03/28/03--01028--012 **150.00

CR20034 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(2)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an addendum with all other like stipulations.

SIGNATURE

[Signature]

3/10/03

305-441-1999

YB