

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000043260

FILED
Jan 13, 2004
Secretary of State

Entity Name: RECOVER EARNINGS GROUP, INC.

Current Principal Place of Business:

12717 WEST SUNRISE BLVD
#426
SUNRISE, FL 33323

New Principal Place of Business:

Current Mailing Address:

12717 WEST SUNRISE BLVD
#426
SUNRISE, FL 33323

New Mailing Address:

FEI Number: 65-1119267

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DELFINO, ALICIA
13733 NW 22 PLACE
SUNRISE, FL 33323 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: PSD () Delete
Name: DELFINO, ALICIA
Address: 13733 NW 22 PLACE
City-St-Zip: SUNRISE, FL 33323

Title: VP (X) Delete
Name: BROWN, COURTNEY
Address: 11326 NW 65 MANOR
City-St-Zip: PARKLAND, FL 33076

Title: VP () Delete
Name: TENNANT, RODNEY
Address: 15606 EASTNOURN DRIVE
City-St-Zip: ODESSA, FL 33556

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALICIA DELFINO

P

01/13/2004

Electronic Signature of Signing Officer or Director

Date