2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P01000089149

Entity Name: AMERIVEST BUSINESS BROKERS, INC.

FILED Feb 22, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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5455 N. FED HWY 5455 N. FEDERAL HWY SUITE I SUITE I

BOCA RATON, FL 33487 BOCA RATON, FL 33487

Current Mailing Address: New Mailing Address:

5455 N. FED HWY 5455 N. FEDERAL HWY SUITE I SUITE I BOCA RATON, FL 33487 BOCA RATON, FL 33487

FEI Number: 65-1144224 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RUBIN, FRANK L RUBIN, FRANK L 5455 N. FED HWY 5455 N. FEDERAL HWY SUITE I SUITE

BOCA RATON, FL 33487 US BOCA RATON, FL 33487 US

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.

Title:

SIGNATURE: 02/22/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

VΡ

Title:

Name: Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

RUBIN, FRANK L RUBIN, FRANK L Name: Name: 5455 N. FED HWY, SUITE I 5455 N. FEDERAL HWY, SUITE I Address: Address:

City-St-Zip: BOCA RATON, FL 33487 City-St-Zip: BOCA RATON, FL 33487

(X) Change () Addition () Delete SPALLITTA, A. CHARLES Name: SPALLITTA, A. CHARLES Name: 5455 N. FED HWY, SUITE I 5455 N. FEDERAL HWY, SUITE I Address: Address: BOCA RATON, FL 33487 BOCA RATON, FL 33487 City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition VΡ SANDOR, PETER GASPARRI, ANGELO S Name: Name:

5455 N. FED HWY, SUITE I 5455 N. FEDERAL HWY, SUITE I Address: Address: City-St-Zip: BOCA RATON, FL 33487 City-St-Zip: BOCA RATON, FL 33487

Title: (X) Delete Title: () Change () Addition

GASPARRI, ANGELO S Name: 5455 N FEDERAL HWY SUITE I Address: BOCA RATON, FL 33487 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: FRANK RUBIN PD 02/22/2008