2008 EOD BROEIT CORROBATION

FILED May 05, 2008 08:00 AN Secretary of State

DOCUMENT # P0200 1. Entity Name ROSENBERG FINANCIAL GR		
Principal Place of Business 3700 COCONUT CREEK PKWY STE 140 COCONUT CREEK, FL 33066	Mailing Address 3700 COCONUT CREEK PKWY STE 140 COCONUT CREEK, FL 33066	
DO NOT WR	ITE IN THIS SPA	CE

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STE 140	e of Business IUT CREEK PKWY EEK, FL 33066	Mailing Address 3700 COCONUT CREEK PKWY STE 140 COCONUT CREEK, FL 33066				## (1188)	
DO NOT WRITE IN THIS SPAC		CE	04302008 No Chg-P CR2E034 (11/05) 4. FEI Number				
6. Name and Address of Current Registered Agent ROSENBERG, GLENN 3700 COCONUT CREEK PKWY STE 140 COCONUT CREEK, FL 33066		DO NOT WRITE IN THIS SPACE					
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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution.			5.00 May Be Ided to Fees		1947712 180026-002	150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIF PS ROSENBERG, GLENN 3700 COCONUT CREEK PKWY COCONUT CREEK, FL 33066	RECTORS					
TIFLE NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME	AME TREET ADDRESS ITY- ST-ZIP ITLE AME			DO NOT WRITE IN THIS SPACE			
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME				. •			
STREET ADDRESS CITY-ST-ZIP							

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 a paddress, with all other like empowered.

SIGNATURE: