

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000115141

FILED
Mar 04, 2009
Secretary of State

Entity Name: AMERICAN BROKERAGE & INVESTMENT GROUP, INC.

Current Principal Place of Business:

25 S.E. 2ND AVENUE
606
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

25 S.E. 2ND AVENUE
606
MIAMI, FL 33131

New Mailing Address:

FEI Number: 74-3072160 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: D () Delete
Name: FRANCIS, EUSTACE
Address: 25 S.E. 2ND AVENUE, STE 606
City-St-Zip: MIAMI, FL 33131

Title: DP () Delete
Name: MCALISTER, ABBOTT
Address: 25 S.E. 2ND AVENUE, STE 606
City-St-Zip: MIAMI, FL 33131

Title: DS () Delete
Name: MARCEL, COMMODORE
Address: 25 S.E. 2ND AVENUE, STE 606
City-St-Zip: CORAL GABLES, FL 33131

Title: DV () Delete
Name: PHILIP, CAROLYN
Address: 25 S.E. 2ND AVENUE, STE 606
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: CLARVIS, JOSEPH
Address: 25 S.E. 2ND AVENUE, STE 606
City-St-Zip: MIAMI, FL 33131

Title: T () Delete
Name: SEALES, ROBINSON
Address: 25 S.E. 2ND AVENUE, STE 606
City-St-Zip: MIAMI, FL 33131

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:

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 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: ROBINSON SEALES

T

03/04/2009

Electronic Signature of Signing Officer or Director

_____ Date