

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000000980

Entity Name: US PROPERTY BROKERS, INC.

FILED
Jan 30, 2008
Secretary of State

Current Principal Place of Business:

16500 COLLINS AVE
753
SUNNY ISLES BEACH, FL 331604588 US

New Principal Place of Business:

Current Mailing Address:

CCS 257 PO BOX 025323
MIAMI, FL 331025323 US

New Mailing Address:

16500 COLLINS AVE
753
SUNNY ISLES BEACH, FL 331604588 US

FEI Number: 20-2094332

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAMIREZ, JUAN C
16500 COLLINS AVE
753
SUNNY ISLES BEACH, FL 331604588 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: P () Delete
Name: RAMIREZ, JUAN C
Address: 16500 COLLINS AVE #753
City-St-Zip: SUNNY ISLES BEACH, FL 331604588 US

Title: DIR () Delete
Name: RAMIREZ, ALFREDO J
Address: 16500 COLLINS AVE #753
City-St-Zip: SUNNY ISLES BEACH, FL 33160 US

Title: SEC () Delete
Name: RAMIREZ, JUAN C
Address: 16500 COLLINS AVE #753
City-St-Zip: SUNNY ISLES, FL 33160 US

Title: TREA () Delete
Name: RAMIREZ, JUAN C
Address: 16500 COLLINS AVE #753
City-St-Zip: SUNNY ISLES BEACH, FL 33160 US

Title: DIR () Delete
Name: MORENO, JUAN J MR
Address: 16500 COLLINS AVE SUITE 753
City-St-Zip: SUNNY ISLES BEACH, FL 331604588 US

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: VP (X) Change () Addition
Name: RAMIREZ, IVAN E MR
Address: 1542 PLANTATION POINTE DR
City-St-Zip: ORLANDO, FL 328244840 US

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: JUAN C RAMIREZ

P

01/30/2008

Electronic Signature of Signing Officer or Director

Date