

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000167444

FILED
Apr 24, 2009
Secretary of State

Entity Name: ELIAS BROTHERS GROUP FIVE, INC.

Current Principal Place of Business:

3570 ENTERPRISE AVENUE
SUITE 100
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

3570 ENTERPRISE AVENUE
SUITE 100
NAPLES, FL 34104

New Mailing Address:

FEI Number: 20-3734251

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YITZHAK, RAHAMIM
3570 ENTERPRISE AVENUE
SUITE 100
NAPLES, FL 34104 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: DPTS () Delete
Name: ELIAS, OVADIA R
Address: 14990 TOSCANA WAY
City-St-Zip: NAPLES, FL 34120

Title: V () Delete
Name: YITZHAK, RAHAMIM
Address: 14990 TOSCANA WAY
City-St-Zip: NAPLES, FL 34120

Title: V () Delete
Name: ALIAS, ILAN
Address: 14990 TOSCANA WAY
City-St-Zip: NAPLES, FL 34120

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPTS (X) Change () Addition
Name: ELIAS, OVADIA R
Address: 3570 ENTERPRISE AVENUE #100
City-St-Zip: NAPLES, FL 34104

Title: EV (X) Change () Addition
Name: YITZHAK, RAHAMIM
Address: 3570 ENTERPRISE AVENUE #100
City-St-Zip: NAPLES, FL 34104

Title: EV (X) Change () Addition
Name: ELIAS, ILAN
Address: 3570 ENTERPRISE AVENUE #100
City-St-Zip: NAPLES, FL 34104

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: RONI ELIAS

DPTS

04/24/2009

Electronic Signature of Signing Officer or Director

Date