

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000102638

Entity Name: BROKERLESS, INC.

FILED
Mar 17, 2009
Secretary of State

Current Principal Place of Business:

10630 SW WATERWAY LN
PORT ST LUCIE, FL 34987

New Principal Place of Business:

3400 NE 165TH STREET
NORTH MIAMI BEACH, FL 33160 US

Current Mailing Address:

11266 SW KINGSLAKE CIRCLE
PORT ST LUCIE, FL 34987

New Mailing Address:

3400 NE 165TH STREET
NORTH MIAMI BEACH, FL 33160 US

FEI Number: 56-2603245

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORELLI, NANCY A ESQ
11266 SW KINGSLAKE CIRCLE
PORT ST LUCIE, FL 34987 US

Name and Address of New Registered Agent:

NORELLI, NANCY A ESQ
3330 NE 190TH STREET
UNIT 814
AVENTURA, FL 33180 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.

SIGNATURE:

03/17/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LAUFER, JACK
Address: 11266 SW KINGSLAKE CIRCLE
City-St-Zip: PORT ST LUCIE, FL 34987

Title: VP () Delete
Name: NORELLI, NANCY A
Address: 11266 SW KINGSLAKE CIRCLE
City-St-Zip: PORT ST LUCIE, FL 34987

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LAUFER, JACK
Address: 3400 NE 165TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: VP (X) Change () Addition
Name: NORELLI, NANCY A ESQ
Address: 3400 NE 165TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33160 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: JACK LAUFER

P

03/17/2009

Electronic Signature of Signing Officer or Director

Date