2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000016934

Address:

City-St-Zip:

Entity Name: EXECUTIVE BROKERS INTERNATIONAL, INC.

FILED Feb 15, 2009 Secretary of State

Current Principal Place of Business:		New Princ	New Principal Place of Business:	
7671 BRIDLINGTON D BOYNTON BCH, FL 3				
Current Mailing Address:		New Maili	New Mailing Address:	
7671 BRIDLINGTON DR. BOYNTON BCH, FL 33437			7671 BRIDLINGTON DRIVE BOYNTON BEACH, FL 33472	
FEI Number: 56-2640392	FEI Number Applied For ()	FEI Number Not Appl	licable () Certificate of Status Desired ()	
Name and Address o	f Current Registered Agent:	Name and	Address of New Registered Agent:	
SECONTINE, MARIAN 7671 BRIDLINGTON E BOYNTON BEACH, FI	RIVE			
The above named entition the State of Florida.	ty submits this statement for the p	ourpose of changing i	its registered office or registered agent, or both,	
SIGNATURE:				
	ronic Signature of Registered Age sing Trust Fund Contribution ().	ent	Date	
OFFICERS AND DIRE	•	ADDITION	IS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	PRES () Change (X) Addition SECONTINE, MARIANNE T 7671 BRIDLINGTON DRIVE BOYNTON BEACH, FL 33472 50	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	VP () Change (X) Addition SECONTINE, MARIANNE T 7671 BRIDLINGTON DRIVE BOYNTON BEACH, FL 33472	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	SECT () Change (X) Addition SECONTINE, MARIANNE T 7671 BRIDLINGTON DRIVE BOYNTON BEACH, FL 33472	
Title: Name:	() Delete	Title: Name:	TREA () Change (X) Addition SECONTINE, MARIANNE T	

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.

Address: City-St-Zip:

SIGNATURE: MARIANNE T. SECONTINE PVST 02/15/2009

7671 BRIDLINGTON DRIVE

BOYNTON BEACH, FL 33472