2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000129293

Name:

Address:

City-St-Zip:

JIREH BUSINESS GROUP, INC.

MANALAPAN, FL 33462

236 B SOUTH OCEAN BLVD., #22

Entity Name: CENTER OF FINANCIAL ASSISTANCE INC

FILED May 01, 2009 Secretary of State

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Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	JTH OCEAN AN, FL 334	I BLVD. #22 62 PB			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	JTH OCEAN AN, FL 334	I BLVD. #22 62 PB			
FEI Number:	26-1494828	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
	, MARIA E CEAN BLVI	D .			
22 MANALAPAN, FL 33463 PB US					
	named enti e of Florida.	ty submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent D				Date	
		.193(2)(b), F.S., the corporation did r cing Trust Fund Contribution ().	not receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:		()Delete MARIA E EAN BLVD # 22 N, FL 33462 PB	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:		() Delete Z, JHON M EAN BLVD # 22 N, FL 33462 PB	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	VPST	(X) Delete	Title [.]	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JHON RODRIGUEZ VP 05/01/2009