2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000130311

Address:

City-St-Zip:

P. O. BOX 54657

ATLANTA, GA 30308 US

FILED Mar 13, 2009 Secretary of State

Entity Nan	ne: 1 INTERN	IATIONAL LUXURY BF	ROKERS, INC.			
Current Principal Place of Business:				New Principal Place of Business:		
981 WEST STATE BRIDGE ROAD 84 FORT LAUDERDALE, FL 33315 US				1914 CORDOVA ROAD SUITE 110 FORT LAUDERDALE, FL 33316 US		
Current Mailing Address:				New Mailing Address:		
SUITE 110	DOVA ROAD DERDALE, FL	_ 33316 US				
FEI Number:	26-1675502	FEI Number Applied For	() FEI Nui	mber Not Applicable()	Certificate	of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
MCCULLAR, NEWTON D 3601 N.E. 207TH STREET S -34 AVENTURA, FL 33180 US				MCCULLAR, NEWTON D 3601 N.E. 207TH STREET S -34 LOGGERHEAD MARINA AVENTURA, FL 33180 US		
The above in the State		submits this statement f	or the purpose o	of changing its register	ed office or req	gistered agent, or both,
SIGNATURE:				03/13/2009		
Electronic Signature of Registered Agent				Date		
Election Carr	npaign Financing	g Trust Fund Contribution	().			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PRES () MCCULLAR, NE P.O. BOX 8015 AVENTURA, FL	32		Title: Name: Address: City-St-Zip:	() Change() Addition
Title: Name: Address: City-St-Zip:	TIMMINS, JOHN 981 W STATE E	Delete NM BRIDGE ROAD 84 DALE, FL 33315 US		Title: Name: Address: City-St-Zip:	() Change() Addition
Title: Name:	VP ()	Delete REY A		Title: Name:	() 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.

Address:

City-St-Zip:

SIGNATURE: NEWTON D. MCCULLAR PRES 03/13/2009