

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000058001

FILED  
Apr 28, 2009  
Secretary of State

**Entity Name:** COHEN BROTHERS REALTY SERVICES OF FLORIDA, INC.

**Current Principal Place of Business:**

1855 GRIFFIN ROAD  
SUITE B-482  
DANIA, FL 33004 US

**New Principal Place of Business:**

**Current Mailing Address:**

750 LEXINGTON AVENUE, 28TH FLOOR  
NEW YORK, NY 10022 US

**New Mailing Address:**

**FEI Number:** 26-2825540

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROSENTHAL, ALEX P ESQ.  
2115 N COMMERCE PARKWAY  
WESTON, FL 33326 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: P ( ) Delete  
Name: COHEN, CHARLES S  
Address: 750 LEXINGTON AVENUE, 28TH FLOOR  
City-St-Zip: NEW YORK, NY 10022 US

Title: VP ( ) Delete  
Name: LANDY, MICHAEL  
Address: 1855 GRIFFIN ROAD, SUITE B-482  
City-St-Zip: DANIA, FL 33004 US

Title: S ( ) Delete  
Name: COHEN, CHARLES S  
Address: 750 LEXINGTON AVENUE, 28TH FLOOR  
City-St-Zip: NEW YORK, NY 10022 US

Title: T ( ) Delete  
Name: COHEN, CHARLES S  
Address: 750 LEXINGTON AVENUE, 28TH FLOOR  
City-St-Zip: NEW YORK, NY 10022 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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:** CHARLES S COHEN

PRES

04/28/2009

Electronic Signature of Signing Officer or Director

Date