

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000063413

FILED
Mar 24, 2009
Secretary of State

Entity Name: THE TELLER GROUP OF FLORIDA INC.

Current Principal Place of Business:

2255 GLADES RD., SUITE 324A
BOCA RATON, FL 33431 US

New Principal Place of Business:

Current Mailing Address:

2255 GLADES RD., SUITE 324A
BOCA RATON, FL 33431 US

New Mailing Address:

FEI Number: 65-0440752

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEINKEN, LOIS
930 S.E. 9TH AVE
POMPANO BEACH, FL 33060 US

Name and Address of New Registered Agent:

COHN, LEONARD
4405 TUSCANY WAY
BOYNTON BEACH, FL 33060 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: LEONARD COHN

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NEINKEN, LOIS
Address: 930 S.E. 9TH AVE
City-St-Zip: POMPAN0 BEACH, FL 33060

Title: P () Delete
Name: COHN, LEONARD
Address: 4405 TUSCANY WAY
City-St-Zip: BOYNTON BEACH, FL 33435

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LEONARD COHN

PRES

03/24/2009

Electronic Signature of Signing Officer or Director

Date