2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000090526

Entity Name: U.S. FINANCE & INVESTMENT BANKERS, INC.

FILED Apr 22, 2005 Secretary of State

Current Princip	al Place of Business:	New Princip	al Place of Business

275 FONTAINEBLEAU BLVD. 6941 NW 52 STREET. SUITE 169 SUITE 124 MIAMI, FL 33172 MIAMI, FL 33166

New Mailing Address: Current Mailing Address:

6941 NW 52 STREET 275 FONTAINEBLEAU BLVD. SUITE 124 SUITE 169 MIAMI, FL 33172 MIAMI, FL 33166

FEI Number: 65-0876027 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

AROCHA, FIDEL AROCHA, FIDEL E 275 FONTAINEBLEAU BLVD. 1103 SW 145TH AVENUE SUITE 169 MIAMI, FL 33184 US MIAMI, FL 33172 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: FIDEL E AROCHA 04/22/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition CFO () Delete Title: ALFONSO, ABEL Name: ALFONSO, ABEL Name:

14273 N.W. 24TH STREET 14273 N.W. 24TH STREET Address: Address:

City-St-Zip: MIAMI, FL 33175 City-St-Zip: MIAMI, FL 33175

VΡ Title: Title: () Delete (X) Change () Addition Name: GONZALEZ, LINDA L Name: GONZALEZ, LINDA L

1103 SW 145TH AVE. 1103 SW 145TH AVE. Address: Address: MIAMI, FL 33184 MIAMI, FL 33184 City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: **PCFO** () Delete PCFO

AROCHA, FIDEL AROCHA, FIDEL E Name: Name: 1103 SW 145TH AVENUE 1103 SW 145TH AVENUE Address: Address: MIAMI, FL 33184 City-St-Zip: MIAMI, FL 33184

City-St-Zip:

Title: VΡ () Delete Title: CFO (X) Change () Addition

GONZALEZ, LÍNDA L HOLTZ, RYAN Name: Name: Address: 1103 SW 145TH AVENUE Address: 3882 SW 89TH AVENUE

City-St-Zip: City-St-Zip: MIAI, FL 33184 MIAMI, FL 33165

Title: Title: () Delete () Change (X) Addition

BENJAMIN, SHARON Name: Name: Address: Address: 12345 SW 18ST City-St-Zip: City-St-Zip: MIAMI, FL 33175

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: FIDEL E AROCHA **PCEO** 04/22/2005