

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000090526

FILED
Apr 30, 2009
Secretary of State

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

Current Principal Place of Business:

6941 NW 52 STREET,
SUITE 124
MIAMI, FL 33166

New Principal Place of Business:

6941 NW 52 STREET
SUITE 124
MIAMI, FL 33166

Current Mailing Address:

1103 SW 145 AVENUE
MIAMI, FL 33184

New Mailing Address:

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

Name and Address of Current Registered Agent:

AROCHA, EDEL
1103 SW 145TH AVENUE
MIAMI, FL 33184 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: VP () Delete
Name: ALFONSO, ABEL
Address: 14273 N.W. 24TH STREET
City-St-Zip: MIAMI, FL 33175

Title: D () Delete
Name: GONZALEZ, LINDA L
Address: 1103 SW 145TH AVE.
City-St-Zip: MIAMI, FL 33184

Title: PCEO () Delete
Name: AROCHA, EDEL
Address: 1103 SW 145TH AVENUE
City-St-Zip: MIAMI, FL 33184

Title: CFO () Delete
Name: HOLTZ, RYAN
Address: 3882 SW 89TH AVENUE
City-St-Zip: MIAMI, FL 33165

Title: VP () Delete
Name: BENJAMIN, SHARON
Address: 12345 SW 18ST
City-St-Zip: MIAMI, FL 33175

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:

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: EDEL AROCHA

CEO

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date