

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000058278

**Entity Name:** THE EXPERTS, INC.

**Current Principal Place of Business:**

2400 E. COMMERCIAL BLVD  
SUITE 420  
FT LAUDERDALE, FL 33308

**Current Mailing Address:**

2400 E. COMMERCIAL BLVD  
SUITE 420  
FT. LAUDERDALE, FL 33308 US

**FEI Number: 65-0847042**

**Certificate of Status Desired: No**

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

ZALDIVAR, ALEX  
2400 E. COMMERCIAL BLVD  
SUITE 420  
FT. LAUDERDALE, FL 33308 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: ALEXANDER ZALDIVAR**

**01/30/2014**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CEO  
Name HOSHKO, THOMAS  
Address 4900 N OCEAN DR APT 208  
City-State-Zip: FT LAUDERDALE FL 33308

Title EVP, SECRETARY  
Name MCLEAN, TIMOTHY  
Address 1031 SW 15TH STREET  
City-State-Zip: BOCA RATON FL 33486

Title CSO  
Name ZANKI, MARK  
Address 2400 E. COMMERCIAL BLVD  
SUITE 420  
City-State-Zip: FT LAUDERDALE FL 33308

Title CFO  
Name ZALDIVAR, ALEXANDER  
Address 2400 E. COMMERCIAL BLVD  
SUITE 420  
City-State-Zip: FT LAUDERDALE FL 33308

Title COO  
Name HOSHKO, THOMAS P  
Address 2400 E. COMMERCIAL BLVD  
SUITE 420  
City-State-Zip: FT LAUDERDALE FL 33308

*I hereby 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 all other like empowered.*

**SIGNATURE: THOMAS HOSHKO**

**PRESIDENT**

**01/30/2014**

Electronic Signature of Signing Officer/Director Detail

Date