

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000105271

Entity Name: S E P A GROUP INC.

FILED
Mar 11, 2008
Secretary of State

Current Principal Place of Business:

515 VALENCIA #4
CORAL GABLES, FL 33114

New Principal Place of Business:

1519 ANCONA AVE
CORAL GABLES, FL 33146

Current Mailing Address:

PO BOX 142142
CORAL GABLES, FL 33114

New Mailing Address:

2525 PONCE DE LEON BLVD
5TH FLOOR
CORAL GABLES, FL 33134

FEI Number: 59-3756442

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PENNIE, KATHERINE
1512 GLENWAY DR.
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

EVERETT, MICHAEL
2525 PONCE DE LEON BLVD 5TH FLOOR
CORAL GABLES, FL 33134 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: MICHAEL M. EVERETT

03/11/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PENNIE, KATHERINE
Address: 1512 GLENWAY DR.
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: EVERETT, MICHAEL M
Address: 2525 PONCE DE LEON BLVD 5TH FLOOR
City-St-Zip: CORAL GABLES, FL 33134

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: MICHAEL EVERETT

D

03/11/2008

Electronic Signature of Signing Officer or Director

Date