2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 21, 2005 8:00 am Secretary of State

DOCUMENT # P02000047669 1. Entity Name PIL GROUP, INC.							04-21-200:	5 90225	5 036 ***1:	58.75
18331 PINE PEMBROKE I	se of Business S BLVD., STE 14 PINES, FL 3302	29	Mailing Address 18331 PINES BLVD., STE 148 SUITE # 210 PEMBROKE PINES, FL 33029							
2. Principal P	Place of Business		18531 FINES DWD							
Suite, Apt. #, etc.			Suite, Apt. #, etc. # 148			04052005 Chg-P CR2E034 (10/03)				
City & State			PENBLOKE PINGS, FLORIDA			4. FEI Numb				pplied For at Applicable
Zip		Country	₹ ⁶ 3029	Cour	itry A	5. Certificate	of Status Desired	×	\$8.75 Add	
	6. Name an	d Address of Current F	egistered Agent		7. Name and Address of New Registered Agent Name					
	CARLOS'S									
	IES BLVD., S KE PINES, F!			Street Address (P.O. Box Number is Not Acceptable)						
	-				City			F	Zip Cod	5
8. 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. I am familiar with, and accept the obligations of registered agent.										
SIGNATURE										
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees									!	
10.	l n	OFFICERS AND I		11,		ADDITIONS	/CHANGES TO OFF	ICERS AN	ND DIRECTORS	S IN 11
TITLE NAME	D BOBBIO, CA	RLOS S	☐ Delete TITLE NAME			☐ Change ☐ Add			☐ Addition	
STREET ADDRESS CITY-ST-ZIP	1	BLVD., STE 148			EET ADDRESS					
TITLE	PEMBROKE	PINES, FL 33029	Delete TITLE		-ST-ZIP				Change	Addition
NAME			NAN		IE				[_) Orlange	□ Macillon
STREET ADDRESS CITY-ST-ZIP					EET ADDRESS '-ST-ZIP	SS ·				
TITLE			☐ Delete T		E				Change	Addition
NAME STREET ADDRESS				NAM Stri	IE EET ADDRESS					
CITY-ST-ZIP					'-SI-ZIP					
TITLE NAME		-	☐ Delete	TITL	- I				☐ Change	Addition
STREET ADDRESS				NAM STRE	ET ADDRESS					
CITY-ST-ZIP				CITY	-ST-ZIP					
TITLE NAME			☐ Delete	TITL					Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP				STRE	ET ADDRESS					
TITLE	-		☐ Delete	TITU	-ST-ZIP	······································			☐ Change	Addition
NAME			boote	NAM	_				change	C) Addition
STREET ADDRESS CITY-ST-ZIP		1			ET ADDRESS -ST-ZIP					
12. I hereby o	certify that the inf	formation supplied with	this filing does not qualify for	or the eve	motion stated in Sc	oction 119.07(3)	(i), Florida Statutes.	l further c	ertify that the in	nformation
indicated on this report of a pelemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the red ever or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.										
1 M Pagin Connect alligher monor are										
SIGNATURE: OBOIO, CALLOS S. O4115105 1766-957-9595										

ATTACHMENT 40063915 #POZOPOPY7669

PIL GROUP, INC. 18331 PINE BLVD., STE. 148 PEMBROKE PINE, FLORIDA 33029

March 22, 2005

Florida Department of State Division of Corporation P.O. Box 1500 Tallahassee, Florida 32302

Re: PIL GROUP, INC. DOC. No. P02000047669

To Whom It May Concern:

Please be advised that we have not received the renewal notice form for the current year renewal. we are enclosing our check in the amount of One Hundred fifty eight dollars and 75 cents (158.75) for the renewal of the corporation year plus a certificate of status, from your office.

Thanking you in advance for your prompt attention to this matter.

Truly Yours,

Carlos S. Bobbio President