

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
May 25, 2007  
Secretary of State**

DOCUMENT# P02000070563

Entity Name: NORTH AMERICAN HOSPITALITY GROUP, INC.

**Current Principal Place of Business:**

5554 METRO WEST BLVD STE 107  
ORLANDO, FL 32811

**New Principal Place of Business:**

**Current Mailing Address:**

5554 METRO WEST BLVD STE 107  
ORLANDO, FL 32811

**New Mailing Address:**

FEI Number: 52-2365794      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

MITREVICA, ANNA  
5554 METRO WEST BLVD STE 107  
ORLANDO, FL 32811    US

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

HUNTER, NATALYA  
5554 METRO WEST BLVD STE 107  
ORLANDO, FL 32811    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: NATALYA HUNTER      05/25/2007  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: MITREVICA, ANNE  
Address: 5554 METRO WEST BLVD #107  
City-St-Zip: ORLANDO, FL 32811

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PST      (X) Change ( ) Addition  
Name: HUNTER, NATALYA  
Address: 5554 METRO WEST BLVD #107  
City-St-Zip: ORLANDO, FL 32811

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: NATALYA HUNTER      P      05/25/2007  
Electronic Signature of Signing Officer or Director      Date