2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2007
Secretary of State

DOCUMENT# P02000079964

Entity Name: UNLIMITED ENTERPRISES GROUP, INC.

Current Principal Place of Business:

1435 ARCHER ST
LEHIGH ACRES, FL 33972

New Principal Place of Business:

1505 ELAINE AVE N
LEHIGH ACRES, FL 33971

Current Mailing Address:

1435 ARCHER ST
LEHIGH ACRES, FL 33972

New Mailing Address:

1505 ELAINE AVE N
LEHIGH ACRES, FL 33971

FEI Number: 54-2065037 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DIAZ, SIXTO ALBERTO
1435 ARCHER ST
LEHIGH ACRES, FL 33972 US

Name and Address of New Registered Agent:

DIAZ, SIXTO ALBERTO
1505 ELAINE AVE N
LEHIGH ACRES, FL 33971 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: SIXTO A DIAZ 02/08/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VPD (X) Delete
Name: DIAZ, ALBERTO
Address: 2120 NE 7 PL
City-St-Zip: CAPE CORAL, FL 33909

Title: PD ( ) Delete
Name: DIAZ, SIXTO ALBERTO
Address: 1435 ARCHER ST
City-St-Zip: LEHIGH ACRES, FL 33972

Title: TD ( ) Delete
Name: GARCIA, ADOLFO F
Address: 1505 ELAINE AVE NORTH
City-St-Zip: LEHIGH ACRES, FL 33971

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change ( ) Addition
Name: DIAZ, SIXTO ALBERTO
Address: 1435 ARCHER ST
City-St-Zip: LEHIGH ACRES, FL 33972

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: PD ( ) Change (X) Addition
Name: DIAZ, BARBARA L
Address: 1505 ELAINE AVE N
City-St-Zip: LEHIGH ACRES, FL 33971

I hereby certify that the information supplied with this filing does not qualify for the 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: ADOLFO F GARCIA TD 02/08/2007
Electronic Signature of Signing Officer or Director Date