

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000083967

Entity Name: THE EVENT GROUP, INC.

FILED
Oct 06, 2004
Secretary of State

Current Principal Place of Business:

709 GRAN KAYMEN WAY
APOLLO BEACH, FL 33572

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1866
RIVERVIEW, FL 33568

New Mailing Address:

FEI Number: 55-0793714

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURNER, BRIAN
709 GRAN KAYMEN WAY
APOLLO BEACH, FL 33572 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TURNER, DONALD G SR
Address: 709 GRAN KAYMEN WAY
City-St-Zip: APOLLO BEACH, FL 33572

Title: STD () Delete
Name: TURNER, BRIAN
Address: 709 GRAN KAYMEN WAY
City-St-Zip: APOLLO BEACH, FL 33572

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BRIAN TURNER

STD

10/06/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date