

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000086315

Entity Name: BOSTON GROUP, INC.

FILED
Apr 23, 2009
Secretary of State

Current Principal Place of Business:

7175C NW 27TH AVENUE
MIAMI, FL 33147 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 470456
MIAMI, FL 33247 US

New Mailing Address:

FEI Number: 20-0135676 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOWODWORSKY, DORIS
7175C NW 27TH AVENUE
MIAMI, FL 33147 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NOWODWORSKY, DORIS
Address: 7175C NW 27TH AVENUE
City-St-Zip: MIAMI, FL 33147 US

Title: D () Delete
Name: MARTINEZ, ANDRES
Address: 7175C NW 27TH AVENUE
City-St-Zip: MIAMI, FL 33147 US

Title: D () Delete
Name: MARTINEZ, DANIEL
Address: 7175C NW 27TH AVENUE
City-St-Zip: MIAMI, FL 33147 US

Title: D () Delete
Name: ANGULO, RODRIGO
Address: 7175C NW 27TH AVENUE
City-St-Zip: MIAMI, FL 33147 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: DORIS NOWODWORSKY

P

04/23/2009

Electronic Signature of Signing Officer or Director

_____ Date