## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000118596

SASTRE, JON

MIAMI, FL 33131

200 SE 1ST STREET SUITE 604

Name:

Address:

City-St-Zip:

FILED Apr 29, 2007 Secretary of State

Entity Na	me: CONQL	JEST BUSINESS GROUP,	INC.				
Current P	rincipal Plac	e of Business:	New	New Principal Place of Business:			
200 SE 1S SUIE 400 MIAMI, FL	T STREET 33131						
Current M	lailing Addre	ess:	New	New Mailing Address:			
200 SE 1S SUIE 400 MIAMI, FL	T STREET 33131						
FEI Number	: 06-1711311	FEI Number Applied For (	) FEI Number No	t Applicable ( )	Certificate of Status Desi	ired()	
Name and	Address of	Current Registered Age	nt: Name	and Address	of New Registered Agent	<b>::</b>	
COTE, DE 9991 SW 3 MIAMI, FL	32 ST	6					
	named entity of Florida.	submits this statement for	the purpose of chan	ging its registere	ed office or registered agen	nt, or both,	
SIGNATU	RE:						
	Electro	onic Signature of Registere	d Agent		Date		
Election Car	npaign Financi	ng Trust Fund Contribution (	).				
OFFICER	S AND DIRE	CTORS:	ADDI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	VD ( COTE, DENN 9991 SW 32 MIAMI, FL 33	ST	Title: Name: Addres City-St		() Change () Addition		
Title: Name: Address: City-St-Zip:	ARDILA, SER	STREET SUITE 604	Title: Name: Addres City-St		T STREET SUITE 400		
Title: Name: Address: City-St-Zip:	TOSADO, BE	STREET SUITE 604	Title: Name: Addres City-St		T STREET SUITE 400		
Title:	VD (	) Delete	Title:	PD	(X) Change ( ) Addition		

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 an an enterphase with an eddress with all other like empowered. above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SASTRE, JON

MIAMI, FL 33131

200 SE 1ST STREET SUITE 400

SIGNATURE: DENNIS J. COTE VD 04/29/2007