2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000160259

City-St-Zip:

ORLANDO, FL 32812

Entity Name: STATEWIDE PROPERTIES GROUP, INC

FILED Jan 15, 2007 Secretary of State

Entity Name: STATEWIDE PROPERTIES GROUP, INC.					
Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
5448 HOFFNER AVE STE 304 ORLANDO, FL 32812			5448 HOFFNER AV 304 ORLANDO, FL 328		
Current Mailing Address:			New Mailing Addr	New Mailing Address:	
5448 HOFFNER AVE STE 304 ORLANDO, FL 32812			304	5448 HOFFNER AVE 304 ORLANDO, FL 32812	
FEI Number:	20-2102902	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
FILINGS, INC. 3732 NW 16TH ST FT LAUDERDALE, FL 33311 US			5448 HOFFNÉR A\ 304	VIAMONTES, RENE 5448 HOFFNER AVENUE 304 ORLANDO, FL FL US	
The above in the State		ubmits this statement for the p	urpose of changing its registe	ered office or registered agent, or both,	
SIGNATURE: RENE VIAMONTES				01/15/2007	
	Electroni	c Signature of Registered Age	nt	Date	
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () I VIAMONTES, RE 5448 HOFFNER ORLANDO, FL 3	AVE STE 304	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () I VIAMONTES, JU 5448 HOFFNER ORLANDO, FL 3	AVE STE 304	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D () I VIAMONTES, JU 5448 HOFFNER		Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: RENE VIAMONTES DIRE 01/15/2007