

2006 FOR PROFIT CORPORATION ANNUAL REPORT


4/28/2006-90196-038-\$150.00-\$150.00

FILED

06 JUN -9 AM 10: 26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P05000021334
1. Entity Name
SOPEZ HOLDINGS GROUP, INC.



Principal Place of Business Mailing Address
12323 SW 55TH STREET 12323 SW 55TH STREET
SUITE 1002 SUITE 1002
COOPER CITY, FL 33330 US COOPER CITY, FL 33330 US

2. Principal Place of Business 3. Mailing Address
1941 NW 150 Avenue 1941 NW 150 Avenue
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
Pembroke Pines, FL Pembroke Pines, FL
Zip Country Zip Country
33028 USA 33028 USA



04272006 Chg-P CR2E034 (11/05)

4. FEI Number Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
SONNEBORN, KENT D
12323 SW 55TH STREET SUITE 1002 COOPER CITY, FL 33330
1941 NW 150 Avenue Pembroke Pines, FL 33028

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

B. 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. I am familiar with, and accept the obligations of the registered agent.

SIGNATURE *Kent D Sonneborn* DATE 4/27/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when remaining)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00
9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PRES	<input type="checkbox"/> Delete
NAME	SONNEBORN, BRAD D	
STREET ADDRESS	12323 SW 55TH STREET SUITE 1002	
CITY-ST-ZIP	COOPER CITY, FL 33330	
TITLE	VP	<input type="checkbox"/> Delete
NAME	LOPEZ, DAVID A	
STREET ADDRESS	3325 HOLLYWOOD BLVD #303	
CITY-ST-ZIP	HOLLYWOOD, FL 33021	
TITLE	VP	<input type="checkbox"/> Delete
NAME	SONNEBORN, KENT D	
STREET ADDRESS	12323 SW 55TH STREET SUITE 1002	
CITY-ST-ZIP	COOPER CITY, FL 33330	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	1941 NW 150 Avenue	
CITY-ST-ZIP	Pembroke Pines, FL 33028	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	1941 NW 150 Avenue	
CITY-ST-ZIP	Pembroke Pines, FL 33028	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *Kent D Sonneborn* DATE 4/27/06 DAYTIME PHONE # 904 392 6000 X 222