2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 02, 2009
Secretary of State

DOCUMENT# P08000101029

Entity Name: CST GROUP, INC

Current Principal Place of Business:

18101 COLLINS AVENUE
SUITE 4401
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

Current Mailing Address:

18101 COLLINS AVENUE
SUITE 4401
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

FEI Number: 34-4643784 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FAKIRI, WALLI A
19058 SW 17 COURT
MIRAMAR, FL 33029 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: CEO ( ) Delete
Name: DAVIS, CAROLYN
Address: 1425 K STREET NW, SUITE 350
City-St-Zip: WASHINGTON, DC 20005

Title: COO ( ) Delete
Name: SHAPIRO, IRA
Address: 18101 COLLINS AVENUE, UNIT 4401
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: VP ( ) Delete
Name: FAKIRI, WALLI A
Address: 19058 SW 17 COURT
City-St-Zip: MIRAMAR, FL 33029

Title: SECR ( ) Delete
Name: SILLER, STUART
Address: 18101 COLINS AVE. UNIT 4401
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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: STUART SILLER PART 09/02/2009

Electronic Signature of Signing Officer or Director — Date