2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000012272

1. Entity Name 1209 GROUP, INC.

Principal Place of Business

1209 S.E. 3RD AVENUE FORT LAUDERDALE, FL 33301 Mailing Address

1209 S.E. 3RD AVENUE

FORT LAUDERDALE, FL 33316-1905

FILED Mar 10, 2008 08:00 A Secretary of State



DO NOT WRITE IN THIS SPACE

03012008

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0561858

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GELETY, MICHAEL D 1209 SOUTHEAST 3RD AVENUE FT. LAUDERDALE, FL 33316

SIGNATURE:

DO NOT WRITE IN THIS SPACE

8. 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 registered agent.						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent algorithre required when reinstating) DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000852724 03/26/08-80040-014	150.00
10. OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GELETY, MICHAEL D 1209 S.E. 3RD AVENUE FORT LAUDERDALE, FL 33301					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GARCIA, RUBEN M 1209 S.E. 3RD AVENUE FORT LAUDERDALE, FL 33301					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE 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 genor 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 trustile 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.						

MICHAEL D.