I hereby 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 all other like empowered.

Ρ

SIGNATURE: PAOLA GALINDO

Electronic Signature of Signing Officer/Director Detail

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000020731

Entity Name: ALTEX GROUP CORP.

Current Principal Place of Business:

5460 NW 107TH AVE # 112 MIAMI, FL 33178

Current Mailing Address:

5460 NW 107TH AVE # 112 MIAMI, FL 33178

FEI Number: 46-2180667

Name and Address of Current Registered Agent:

GALINDO, PAOLA M 5460 NW 107TH AVE # 112 MIAMI, FL 33178 US

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

Officer/Director Detail :

TitlePNameGALINDO, PAOLA MAddress5460 NW 107TH AVE # 112City-State-Zip:MIAMI, FL 33178

FILED Mar 26, 2014 Secretary of State CC1529531492

Certificate of Status Desired: Yes

Date