2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005380

Entity Name: BTS GROUP, INC.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

MIAMI, FL 33131

MIAMI, FL 33131

OLLOQUI, RICARDO

1432 BRICKELL AVENUE

() Delete

FILED Mar 21, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1432 BRICKELL AVENUE 2620 SW 27TH AVENUE MIAMI, FL 33131 MIAMI, FL 33133 **Current Mailing Address: New Mailing Address:** 1432 BRICKELL AVENUE 2620 SW 27TH AVENUE MIAMI, FL 33131 MIAMI, FL 33133 FEI Number: 65-1096671 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DEL LA PENA & ASSOCIATES, P.A. 601 BRICKELL KEY DRIVE STÉ. 705 MIAMI, FL 33131 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 Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: VPD () Delete Title: (X) Change () Addition OLLOQUI, RAFAEL Name: Name: OLLOQUI, RAFAEL 1432 BRICKELL AVENUE 2620 SW 27TH AVENUE Address: Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33133 Title: DT Title: DT () Delete (X) Change () Addition PROANO, ANDRES Name: PROANO, ANDRES Name: 1432 BRICKELL AVENUE 2620 SW 27TH AVENUE Address: Address: MIAMI, FL 33131 MIAMI, FL 33133 City-St-Zip: City-St-Zip: Title: Title: SD () Delete () Change () Addition DE LA PENA D, LEONCIO E Name: Name: 601 BRICKELL KEY DRIVE STE. 705 Address: Address:

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:

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ANDRES PROANO DT 03/21/2007

(X) Change () Addition

OLLOQUI, RICARDO

MIAMI, FL 33133

2620 SW 27TH AVENUE