2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 28, 2006 8:00 am Secretary of State **DOCUMENT # F04000006177** 04-28-2006 90187 001 ***150 00 THE GENESIS GROUP INTERNATIONAL, INC. Principal Place of Business Mailing Address 9960 CENTRAL PARK BLVD., SOUTH, SUITE 301 9960 CENTRAL PARK BLVD., SOUTH, SUITE 301 AMDIDADA BOCA RATON, FL 33428 BOCA RATON, FL 33428 2. Principal Place of Business 3. Mailing Address 9970 Central Park Blud 9970 Central Park Blud Suite, Apt. #, etc. 04252006 CR2E034 (11/05) City & State 4. FEI Number Applied For 65-0992401 Not Applicable Country 43A \$8.75 Additional 5. Certificate of Status Desired П 3428 Fee Required Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HRAWG CORP. Street Address (P.O. Box Number is Not Acceptable) 1801 N. MILITARY TRAIL, SUITE 200 BOCA RATON, FL 8. The above named entity submits this statement for the purpose of changing its egistered office or registered agent, or both, in the State of Florida. I am familiar with, and accept SIGNATURE Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150,00 After May 1, 2006 Fee will be \$550.00 \Box Trust Fund Contribution Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PD TITLE (L) Change Addition TITLE ☐ Delete FUHR. LINDA E NAME NAME 9970 Central Park Blud., Suiteroo STREET ADDRESS 9960 CENTRAL PARK BLVD., SOUTH, SUITE 301 STREET ADDRESS BOCA Raton, FL 33478 CHY-SI-ZIP CITY-SE-7IP BOCA RATON, FL. 33428 fi☑ Change ☐ Addition TITLE TITLE ☐ Delete NAME BORTNICK, BERNARD NAME 9970 Central Park Blud., Suiteroo BOCS Raton, FL 33478 STREET ADDRESS 9960 CENTRAL PARK BLVD., SOUTH, SUITE 301 STREET ADDRESS CffY-St-7IP BOCA RATON, FL 33428 CHY-ST-ZIP Change Addition TSD ☐ Delete TITLE TITLE FUHR. ALLAN NAME NAME 9970 Central Park Blvd., Suite roo 9960 CENTRAL PARK BLVD., SOUTH, SUITE 301 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOCA RATON FL 3348 CITY-ST-7IP BOCA RATON, FL 33428 ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition TILLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP ☐ Change ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - \$1 - 71P 12. Thereby certify that the information supplied with this filling 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 any fidness, with all other like-empowered. Bernard Bortnick 4/15/06 SIGNATURE:

FILED