2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004327

Entity Name: NOBOX MARKETING GROUP, INC.

FILED Jan 15, 2009 Secretary of State

Current Princip	al Place of Business:	New Princip	al Place of Business

2 ALHAMBRA PLAZA, SUITE 700 180 NE 39TH ST CORAL GABLES, FL 33134 SUITE 225 MIAMI, FL 33137

Current Mailing Address: New Mailing Address:

2 ALHAMBRA PLAZA, SUITE 700 180 NE 39TH ST CORAL GABLES, FL 33134 SUITE 225 MIAMI, FL 33137

FEI Number: 20-2973511 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

IRIZARRY, MARGARITA E
2 ALHAMBRA PLAZA, SUITE 700
CORAL GABLES, FL 33134 US
IRIZARRY, MARGARITA E
180 NE 39TH ST.
SUITE 225
MIAMI, FL 33137 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: 01/15/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 CP () Delete
 Title:
 VCV (X) Change () Addition

 Name:
 GARCIA, CARLOS M
 Name:
 GARCIA, CARLOS M

 Address:
 2 ALHAMBRA PLAZA, SUITE 700
 Address:
 180 NE 39TH ST. , SUITE 225

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: MIAMI, FL 33137

Title: VCV () Delete Title: CP (X) Change () Addition

Name: FITTIPALDI, JÁYSON Name: FITTIPALDI, JÁYSON Address: 2 ALHAMBRA PLAZA, SUITE 700 Address: 180 NE 39TH ST. , SUITE 225

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: MIAMI, FL 33137

Title: DS () Delete Title: DS (X) Change () Addition
Name: HEITLAUF, MONICA S Name: HEITLAUF, MONICA S

Address: 2 ALHAMBRA PLAZA, SUITE 700 Address: 180 NE 39TH ST., SUITE 225

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: MIAMI, FL 33137

Title:DT() DeleteTitle:DT(X) Change () AdditionName:IRIZARRY, MARGARITA EName:IRIZARRY, MARGARITA EAddress:2 ALHAMBRA PLAZA, SUITE 700Address:180 NE 39TH ST., SUITE 225

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: MIAMI, FL 33137

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: MARGARITA IRIZARRY DT 01/15/2009