2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005906

Entity Name: NOLIM GROUP, INC.

City-St-Zip:

BOCA RATON, FL 33486

FILED Mar 13, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1499 W. PALMETTO PARK ROAD 204 BOCA RATON, FL 33486 **New Mailing Address: Current Mailing Address:** 1499 W. PALMETTO PARK ROAD BOCA RATON, FL 33486 FEI Number: 59-2468234 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: LICKSTEIN, FRED K 1395 BRICKELL AVE. 14 FLOOR MIAMI, FL 33131 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: () Delete Title: () Change () Addition CHENG, JOHN CLETUS Name: Name: AVENIDA PRIMERA C NORTE NO. 111 APT. 87136 Address: Address: City-St-Zip: PANAMA 7, PANAMA, City-St-Zip: Title: Title: () Delete () Change () Addition Name: ESCARTIN DE CHENG, ELSA Name: AVENIDA PRIMERA C NORTE NO. 111 APT. 87136 Address: Address: PANAMA 7, PANAMA, City-St-Zip: City-St-Zip: Title: Title: DS () Delete () Change () Addition RODRIGUEZ DE GUEVARA, IDA ENELDA Name: Name: AVENIDA PRIMERA C NORTE NO. 111 APT. 87136 Address: Address: City-St-Zip: PANAMA 7, PANAMA, City-St-Zip: Title: () Delete Title: () Change () Addition ANDREONI, STEPHANIE Name: Name: Address: 1499 WEST PALMETTO PARK RD #204 Address:

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.

City-St-Zip:

SIGNATURE: STEPHANIE ANDREONI D 03/13/2009