2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006127

Entity Name: JUNIPER GROUP, INC.

FILED Jun 18, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 20283 STATE ROAD 7 SUITE 400 BOCA RATON, FL 33498 **Current Mailing Address: New Mailing Address:** 20283 STATE ROAD 7 SUITE 400 BOCA RATON, FL 33498 FEI Number: 11-2866771 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: HRELJANOVIC, VLADO P 20283 STATE ROAD 7 SUITE 400 BOCA RATON, FL 33498 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: () Delete Title: () Change () Addition HUSTON, BARRY Name: Name: 470 PARK AVENUE SOUTH Address: Address: City-St-Zip: NEW YORK, NY 10016 City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: FELDMAN, PETER Name: 15155 MICHELANGELO BLVD. Address: Address: DELRAY BEACH, FL 33446 City-St-Zip: City-St-Zip: Title: **PCEO** Title: () Delete () Change () Addition HRELJANOVIC, VLADO P Name: Name: 82 CAMBRIDGE LANE Address: Address: City-St-Zip: BOYNTON BEACH, FL 33436 City-St-Zip: Title: CFO () Delete Title: () Change () Addition HRELJANOVIĆ, VLADO P Name: Name: Address: 82 CAMBRIDGE LANE Address: City-St-Zip: BOYNTON BEACH, FL 33436 City-St-Zip: Title: (X) Delete Title: () Change () Addition PAULTRE, YVONNE T Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: VLADO P. HRELJANOVIC CEO 06/18/2007

189-41 118TH AVENUE

ST. ALBANS, NY 11412

Address: City-St-Zip: