

**2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F39114

**FILED**  
**Jul 29, 2008**  
**Secretary of State****Entity Name:** ANF GROUP, INC.**Current Principal Place of Business:**12277 SW 55TH ST  
STE 901  
COOPER CITY, FL 33330**New Principal Place of Business:****Current Mailing Address:**12277 SW 55TH ST  
STE 901  
COOPER CITY, FL 33330**New Mailing Address:****FEI Number:** 59-2111285      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**REYES, CARLOS  
401 E. LAS OLAS BLVD, STE 1650  
ROTHSTEIN, ROSENFELTD, ADLER  
FORT LAUDERDALE, FL 33301 US**Name and Address of New Registered Agent:**

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**OFFICERS AND DIRECTORS:****Title:** DP      ( ) Delete  
**Name:** FERNANDEZ, ALBERTO JR  
**Address:** 12277 SW 55TH ST, STE 901  
**City-St-Zip:** COOPER CITY, FL 33330**Title:** DVST      ( ) Delete  
**Name:** FERNANDEZ, NELSON,  
**Address:** 12277 SW 55TH ST, STE 901  
**City-St-Zip:** COOPER CITY, FL 33330**Title:** DV      ( ) Delete  
**Name:** GIL, ALBERTO  
**Address:** 12277 SW 55TH ST, STE 901  
**City-St-Zip:** COOPER CITY, FL 33330**Title:**      ( ) Delete  
**Name:**  
**Address:**  
**City-St-Zip:****ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** VP      ( ) Change (X) Addition  
**Name:** KUNCHER, JOHN  
**Address:** 12277 SW 55TH ST, STE 901  
**City-St-Zip:** COOPER CITY, FL 33330

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: IRA L. LIBANOFF

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

MR.

07/29/2008

\_\_\_\_\_  
Date