

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000002778

FILED  
Feb 16, 2011  
Secretary of State

Entity Name: US GROUP (DE) INC.

## Current Principal Place of Business:

2000 ULTIMATE WAY  
WESTON, FL 33326 US

## New Principal Place of Business:

## Current Mailing Address:

1485 NORTH PARK DRIVE  
WESTON, FL 33326 US

## New Mailing Address:

FEI Number: 65-0694077

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: C  
Name: SCHERR, SCOTT  
Address: 2000 ULTIMATE WAY  
City-St-Zip: WESTON, FL 33326 US

Title: C  
Name: SCHERR, MARC D  
Address: 2000 ULTIMATE WAY  
City-St-Zip: WESTON, FL 33326 US

Title: T  
Name: DAUERMAN, MITCH K  
Address: 2000 ULTIMATE WAY  
City-St-Zip: WESTON, FL 33326 US

Title: V  
Name: CAUSEY, JR., DONALD M  
Address: 2000 ULTIMATE WAY  
City-St-Zip: WESTON, FL 33326 US

Title: S  
Name: MAZA, VIVIAN  
Address: 2000 ULTIMATE WAY  
City-St-Zip: WESTON, FL 33326 US

Title: V  
Name: SATALINO, FRANK P  
Address: 1485 NORTH PARK DRIVE  
City-St-Zip: WESTON, FL 33326 US

I hereby 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 all other like empowered.

SIGNATURE: FRANK P SATALINO

VPT

02/16/2011

Electronic Signature of Signing Officer or Director

Date