2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000001498

Entity Name: ANNA LUCIA GROUP LIMITED CO.

FILED Apr 14, 2007 Secretary of State

Current P	rincipal Place of Business:	New Principal Place of Business:	New Principal Place of Business:	
	IERSET DRIVE			
APT 414 LAUDERD	DALE LAKES, FL 33311			
	lailing Address:	New Mailing Address:		
_		-		
RUA ROV APT 414 BELO HOI	RIZONTE - BRAZIL, MG 31340500	RUA ROVIGO 800 BELO HORIZONTE - BRAZIL, MG 31340500		
FEI Number	: 65-0828344 FEI Number Applied F	For () FEI Number Not Applicable () Certificate of Status Desi	ired (X)	
Name and	l Address of Current Registered A	Agent: Name and Address of New Registered Agent	::	
3961 N. FE), JULIANA EDERAL HWY O BEACH, FL 33064 US			
	e named entity submits this statemer e of Florida.	nt for the purpose of changing its registered office or registered agen	ıt, or both,	
SIGNATUI	RE:			
	Electronic Signature of Regis	stered Agent Date		
Election Ca	mpaign Financing Trust Fund Contributio	on ().		
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTOR	
Title: Name: Address: City-St-Zip:	P () Delete TAMM, RAY 2850 SOMERSET DR., #414 LAUDERDALE LAKES, FL 33311	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	V () Delete TAMM, MARIA J 2850 SOMERSET DR., #414 LAUDERDALE LAKES, FL 33311	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	D () Delete TAMM, RAY B RUA SIRACUSA, 83 BELO HORIZONTE MG BRAZIL,	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	D () Delete TAMM, BERNARDO B RUA SIRACUSA, 83 BELO HORIZONTE MG BRAZIL,	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	D () Delete TAMM, CARLOS A RUA SIRACUSA, 83 BELO HORIZONTE MG BRAZIL,	Title: () Change () Addition Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	D () Delete TAMM, GLENN B RUA SIRACUSA, 83 BELO HORIZONTE MG BRAZIL,	Title: () Change () Addition Name: Address: City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the 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: RAY TAMM

P 04/14/2007