

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2000 8:00 am
Secretary of State

05-22-2000 90069 032 ***158.75

DOCUMENT # F99000002662

1. Entity Name

~~VENTURENOW, INC.~~ Groupnow, Inc.

Principal Place of Business

516 NE 9TH AVENUE
 FORT LAUDERDALE FL 33301-1218

Mailing Address

516 NE 9TH AVENUE
 FORT LAUDERDALE FL 33301-1218

2. Principal Place of Business

2455 E. Sunrise Blvd.

Suite, Apt. #, etc.

Suite 511

City & State
 Ft. Lauderdale

Zip
 33304

Country
 Broward

3. Mailing Address

2455 E. Sunrise Blvd.

Suite, Apt. #, etc.

Suite 511

City & State
 Ft. Lauderdale

Zip
 33304

Country
 Broward



DO NOT WRITE IN THIS SPACE

4. FEI Number

52-2145705

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SIMONETTI, DAVID J
 516 NE 9TH AVENUE
 FORT LAUDERDALE FL 33301-1218

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 2455 E. Sunrise Blvd.
 Suite 511
 City Ft. Lauderdale FL Zip Code 33304

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/25/00
 DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
DPT	SIMONETTI, DAVID J	516 NE 9TH AVENUE	FORT LAUDERDALE FL 33301-1218	<input type="checkbox"/>
VCVP	ELENOWITZ, MARK H	15245 SHADY GROVE ROAD, SUITE 400	ROCKVILLE MD 20850-3295	<input type="checkbox"/>
DS	TAUBMAN, LOUIS ESQ.	39 BROADWAY, SUITE 2704	NEW YORK NY 10006-3003	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
		2455 E. Sunrise Blvd - Suite 511	Ft. Lauderdale, FL 33304	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an release, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/00
 Date

(954) 233-4310
 Daytime Phone #

CR2E034 (9/99)