2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# H17389

FILED Oct 11, 2005 Secretary of State

Entity Nar	ne: SRT GR	OUP, INC.			
Current P	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
3250 MARY STREET, SUITE 401 MIAMI, FL 33133			2523 LINCOLN AVENU MIAMI, FL 33133	2523 LINCOLN AVENUE MIAMI, FL 33133	
Current M	ailing Addre	ss:	New Mailing Address	New Mailing Address:	
3250 MARY STREET, SUITE 401 MIAMI, FL 33133			PO BOX 330985 MIAMI, FL 33233		
FEI Number:	59-2522234	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
2655 LE JE #1101	CHARLES P EUNE ROAD ABLES, FL 3:	3134 US			
	named entity of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE: CHARLE	ES P. SACHER			
Electronic Signature of Registered Agent			ent	Date	
		93(2)(b), F.S., the corporation did no	ot receive the prior notice.		
	S AND DIREC	• , ,	ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DS (SACHER, CHA 2655 LE JEUN MIAMI, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	DPT () Delete	Title:	() Change () Addition	

City-St-Zip:

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

MIAMI, FL

() Delete PARKER, ALFRED B

PARKER, ROBIN Z.,

2523 LINCOLN AVE

2521 LINCOLN AVE MIAMI, FL

Name:

Address: City-St-Zip:

Title:

Name:

Address:

CD

(X) Change () Addition PARKER, ALFRED B

611 SW 28 STREET City-St-Zip: GAINESVILLE, FL 32607

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBIN Z. PARKER DPT

Electronic Signature of Signing Officer or Director

Date

10/11/2005