

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J03222

Entity Name: E GROUP, INC.

FILED  
Apr 16, 2008  
Secretary of State

## Current Principal Place of Business:

8950 DR. ML KING ST N.  
#190  
SAINT PETERSBURG, FL 33702 US

## New Principal Place of Business:

## Current Mailing Address:

8950 DR ML KING ST N.  
#190  
SAINT PETERSBURG, FL 33702 US

## New Mailing Address:

FEI Number: 59-2579863

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DELANO, G. KRISTIN  
360 CENTRAL AVENUE  
SUITE 1560  
ST. PETERSBURG, FL 33701 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: RAWLS, EDGAR O  
Address: 8950 DR. ML KING ST N., #190  
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: S (X) Delete  
Name: RAWLS, KATHLEEN D  
Address: 8950 DR. ML KING ST. N., #190  
City-St-Zip: SAINT PETERSBURG, FL 33702

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: RAWLS, KATHLEEN D  
Address: 8950 DR. ML KING ST N., #190  
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: KATHLEEN D. RAWLS

PD

04/16/2008

Electronic Signature of Signing Officer or Director

Date