

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K09799

FILED
Apr 07, 2006
Secretary of State

Entity Name: KAMIRA GROUP INC.

Current Principal Place of Business:

3311 SW 16TH COURT
FORT LAUDERDALE, FL 33312 US

New Principal Place of Business:

1124 NE 209 TERRACE
NORTH MIAMI BEACH, FL 33179 US

Current Mailing Address:

3311 SW 16TH COURT
FORT LAUDERDALE, FL 33312 US

New Mailing Address:

850 IVES DAIRY RD
T57-PMB102
NORTH MIAMI BEACH, FL 33179 US

FEI Number: 65-0038950

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEGATO, LUCIANO
1124 NE 209TH TERRACE
MIAMI, FL 33179 US

Name and Address of New Registered Agent:

LEGATO, LUCIANO
1124 NE 209TH TERRACE
NORTH MIAMI BEACH, FL 33179 US

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:

04/07/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CUEVAS, ANTONIO
Address: 1124 NE 209TH TERRACE
City-St-Zip: MIAMI, FL 33179 US

Title: VPD () Delete
Name: MASTELLA-CUEVAS, ALICIA
Address: 1124 NE 209TH TERRACE
City-St-Zip: MIAMI, FL 33179 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CUEVAS, ANTONIO
Address: 1124 NE 209TH TERRACE
City-St-Zip: NORTH MIAMI BEACH, FL 33179 US

Title: VPD (X) Change () Addition
Name: MASTELLA-CUEVAS, ALICIA E
Address: 1124 NE 209TH TERRACE
City-St-Zip: NORTH MIAMI BEACH, FL 33179 US

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: ANTONIO CUEVAS

PD

04/07/2006

Electronic Signature of Signing Officer or Director

Date