2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K26359

Entity Name: THE BESILU GROUP, INC.

FILED Mar 10, 2009 Secretary of State

MIAMI, FL 33165 US

Current Mailing Address: New Mailing Address:

MIAMI, FL 33165 US

FEI Number: 65-0072498 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MAURY, ALBERT

11501 SW 40TH ST

MIAMI, FL 33165 US

MAURY, ALBERT

11501 SW 40TH STREET

2ND FLOOR

MIAMI, FL 33165 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: MARK S KOONDEL 03/10/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: C (X) Change () Addition

 Name:
 LEON, BENJAMIN JR.
 Name:
 LEON, BENJAMIN JR.

 Address:
 11501 SW 40 ST.
 Address:
 11501 SW 40 ST.

 City-St-Zip:
 MIAMI, FL 33165
 City-St-Zip:
 MIAMI, FL 33165

Title: V () Delete Title: P (X) Change () Addition Name: LEON, BENJAMIN III Name: LEON, BENJAMIN III

Address: 11501 SW 40 ST. Address: 11501 SW 40 ST. City-St-Zip: MIAMI, FL 33165 City-St-Zip: MIAMI, FL 33165

Title: ST () Delete Title: T (X) Change () Addition

 Name:
 LEON, SILVIA
 Name:
 LEON, SILVIA

 Address:
 11501 SW 40 ST.
 Address:
 11501 SW 40 ST.

 City-St-Zip:
 MIAMI, FL 33165
 City-St-Zip:
 MIAMI, FL 33165

Title: () Delete Title: S () Change (X) Addition

Name: Name: LEON, LOURDES

Address: Address: 11501 SW 40TH STREET SECOND FLOOR

City-St-Zip: City-St-Zip: MIAMI, FL 33165

Title: () Delete Title: V () Change (X) Addition

Name: Name: MAURY, ALBERT R

Address: Address: 11501 SW 40TH STREET SECOND FLOOR

City-St-Zip: City-St-Zip: MIAMI, FL 33165

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: BENJAMIN LEON JR C 03/10/2009