

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000025087

FILED
Jan 04, 2007
Secretary of State

Entity Name: CACTUS GROUP, LLC

Current Principal Place of Business:

805 SOUTH KIRKMAN ROAD
SUITE 103
ORLANDO, FL 32811

New Principal Place of Business:

Current Mailing Address:

807 GULLBERRY LN
ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address:

FEI Number: 20-3297317

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARES, MIA
807 GULLBERRY LANE
ALTAMONTE SPRINGS, FL 32714 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: WARES, MIA
Address: 807 GULLBERRY LN
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: MGRM () Delete
Name: HAIDER, SHARIFF M
Address: 1801 GRAND ISLE CIRCLE
City-St-Zip: ORLANDO, FL 32810 US

Title: MGRM () Delete
Name: ALAM, MAHBUBUL
Address: 403 MINDY LANE
City-St-Zip: PISCATAWAY, NJ 08854 US

Title: PART () Delete
Name: RAHMAN, ABU M
Address: 325 WEMBLEY CIRCLE
City-St-Zip: ATLANTA, GA 30328

Title: PART () Delete
Name: HASSAN, SHAIK
Address: 807 GULLBERRY LN
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: PART () Delete
Name: KAZI, MAIN M
Address: 6702 BOWIE DR.
City-St-Zip: SPRINGFIELD, VA 22150

ADDITIONS/CHANGES:

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

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

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

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

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

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

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MIA WARES

CEO

01/04/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date