## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **FILED** Apr 30, 2005 -08:00 AM-Secretary of State **DOCUMENT # L82203** 1. Entity Name EARTH GROUP, INC. Priffcipal Place of Business Mailing Address % GERALD BIEBER % GERALD BIEBER 2200 ANDREWS AVENUE 2200 ANDREWS AVENUE POMPANO BEACH, FL 33069 POMPANO BEACH, FL 33069 04182005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 13-3599656 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BIEBER, GERALD DO NOT WRITE 2200 ANDREWS AVENUE POMPANO BEACH, FL 33069 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. P TITLE BIEBER, GERALD NAME 27 SNOW DROP DRIVE STREET ADDRESS NEW CITY, NY CiTY-SY-7IP U00000348808 05/02/05-80033-023 150.00 TITLE BIEBER, GERALD 27 SNOW DROP DRIVE STREET ADDRESS NEW CITY, NY CITY - ST - ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIF TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this fling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information inclicated on this report or supplemental report is after an additional accurate and that my 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 eppowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #