

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# M27155

FILED
Aug 17, 2009
Secretary of State**Entity Name:** THE DE MOYA GROUP, INC.**Current Principal Place of Business:**14600 SW 136 ST.
MIAMI, FL 33186 US**New Principal Place of Business:****Current Mailing Address:**14600 SW 136 ST.
MIAMI, FL 33186 US**New Mailing Address:****FEI Number:** 59-2629362 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**DE MOYA, ARMANDO
14600 SW 136TH STREET
MIAMI, FL 33186 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

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: DE MOYA, JORGE J
Address: 14600 SW 136TH STREET
City-St-Zip: MIAMI, FL 33186

Title: VD () Delete
Name: DE MOYA, A J
Address: 14600 SW 136TH STREET
City-St-Zip: MIAMI, FL 33186

Title: PD () Delete
Name: DE MOYA, ARMANDO
Address: 14600 SW 136TH ST
City-St-Zip: MIAMI, FL 33186

Title: DV () Delete
Name: DE MOYA, ALVARO
Address: 14600 SW 136TH STREET
City-St-Zip: MIAMI, FL 33186

Title: ST/D () Delete
Name: DE MOYA, ALISA
Address: 14600 SW 136TH STREET
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: DE MOYA, JORGE
Address: 14600 SW 136TH STREET
City-St-Zip: MIAMI, FL 33186 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: VD (X) Change () Addition
Name: DE MOYA, ALVARO
Address: 14600 SW 136TH STREET
City-St-Zip: MIAMI, FL 33186

Title: () Change () Addition
Name:
Address:
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 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: ARMANDO DE MOYA

PRES

08/17/2009

Electronic Signature of Signing Officer or Director

Date