2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000868

Entity Name: THE ANGLZZ GROUP, INC.

FILED Apr 21, 2009 Secretary of State

Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:	
	TLANTIC BLVI D BEACH, FL				
Current Mailing Address:			New Mailir	New Mailing Address:	
2700 W ATLANTIC BLVD STE 256 POMPANO BEACH, FL 33069			256	2700 W ATLANTIC BLVD STE 256 POMPANO BEACH, FL 33069	
FEI Number:	: 59-3767675	FEI Number Applied For ()	FEI Number Not Appli	icable () Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and	Address of New Registered Agent:	
The above in the State	BLIN WAY LM BEACH, Fl named entity of Florida.		urpose of changing it	s registered office or registered agent, or both,	
SIGNATURE: Electronic Signature of Registered Agent			nt	Date	
OFFICERS	S AND DIREC			S/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip: Title: Name: Address:	DUVENNE, JUI 3081 PALM PL MARGATE, FL	ACE 33063) Delete EVAIS D	Title: Name: Address: City-St-Zip: Title: Name: Address:	() Change () Addition () Change () Addition	
City-St-Zip: Title: Name: Address: City-St-Zip:	V (CORASMIN, DI 3081 PALM PL MARGATE, FL) Delete EVAIS D	City-St-Zip: Title: Name: Address: City-St-Zip:	() Change () Addition	
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Title: Name: Address: City-St-Zip:	V (CORASMIN, DI 3081 PALM PL MARGATE, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	T () Change (X) Addition MONTROSE, MARK 1420 N.E 114 ST MIAMI, FL 33314	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARKMONTROSE T 04/21/2009