

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003005

FILED
Apr 07, 2009
Secretary of State

Entity Name: BRAZILIAN BUSINESS GROUP INC.

Current Principal Place of Business:

5491 UNIVERSITY DR.
104A
CORAL SPRINGS, FL 33067

Current Mailing Address:

5491 UNIVERSITY DR.
104A
CORAL SPRINGS, FL 33067

New Principal Place of Business:

5491 UNIVERSITY DR.
104A
CORAL SPRINGS, FL 33067 US

New Mailing Address:

5491 UNIVERSITY DR.
104A
CORAL SPRINGS, FL 33067 US

FEI Number: 26-0203499

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WESTCHESTER INTERNATIONAL CORP
5491 UNIVERSITY DR
104A
CORAL SPRINGS, FL 33067 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: P () Delete
Name: VASCONCELLOS, ALOYSIO
Address: 8628 VIA ANCHO RD
City-St-Zip: BOCA RATON, FL 33433

Title: VP () Delete
Name: CARIELLO, FERNANDO
Address: 3517 NW 82 AVENUE
City-St-Zip: MIAMI, FL 33122

Title: D () Delete
Name: FURTADO, LAINE
Address: 1015 W. NEWPORT CENTER DR., #104
City-St-Zip: DEERFIELD BCH, FL 33442

Title: D () Delete
Name: PEREIRA, CLAUDIO
Address: 440 EAST SAMPLE RD., SUITE 203
City-St-Zip: POMPANO BEACH, FL 33064

Title: D () Delete
Name: FARIA, JUAREZ
Address: 11131 NW 26 DR
City-St-Zip: CORAL SPRINGS, FL 33065

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

SIGNATURE: ALOYSIO VASCONCELLOS

MR.

04/07/2009

Electronic Signature of Signing Officer or Director

_____ Date