2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006004

FILED Jan 27, 2009 Secretary of State

Entity Name: CONSCIOUS LIVING SPIRITIST GROUP, INC.

Current Principal Place of Business:		New Principal Place of Business:	
OTH STREET ORES, FL 331	38		
/lailing Addres	ss:	New Mailing Addres	s:
OTH STREET ORES, FL 331	38		
r: 26-0435319	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
d Address of C	Current Registered Agent:	Name and Address of	of New Registered Agent:
SUZANA 9TH STREET ORES, FL 331	38 US		
e named entity s e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
RE:			
Electror	ic Signature of Registered Ag	ent	Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
SIMOES, SUZA 307 NE 99TH S	NA TREET	Title: Name: Address: City-St-Zip:	() Change () Addition
NETTO, MARCI 965 SOUTH SH	ELO C ORE DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition
T () Delete DEGASPERI, MARIA A s: 601 NE 170TH STREET 608 -Zip: N MIAMI BEACH, FL 33160			
DEGASPERI, N 601 NE 170TH	1ARIA A STREET 608	Title: Name: Address: City-St-Zip:	() Change () Addition
	PITH STREET ORES, FL 331 Pailing Address OTH STREET ORES, FL 331 Pailing Address of Comments of Comm	PITH STREET ORES, FL 33138 Plailing Address: DITH STREET ORES, FL 33138 Plailing Address: DITH STREET ORES, FL 33138 Plailing Address of Current Registered Agent: SUZANA DITH STREET ORES, FL 33138 Plailing Address of Current Registered Agent: SUZANA DITH STREET ORES, FL 33138 US Plailing Address Blailing Address: Blailing Address: Suzana Blailing Address: Flailing Address: Blailing Address: Suzana Blailing Address: Flailing Address: Blailing Address of Current Registered Agent: Blailing Add	DTH STREET ORES, FL 33138 Mailing Address: New Mailing Address DTH STREET ORES, FL 33138 Responsible to the purpose of changing its registered agent and address of Florida. Responsible to the purpose of changing its registered agent and address of Florida. Responsible to the purpose of changing its registered agent and address of Florida. Responsible to the purpose of changing its registered agent and address of Florida. Responsible to the purpose of changing its registered agent and address of Florida. Responsible to the purpose of changing its registered agent and address of Florida. Responsible to the purpose of changing its registered agent and address of Florida. Responsible to the purpose of changing its registered agent and address of Florida. Responsible to the purpose of changing its registered agent and address of Florida. Responsible to the purpose of changing its registered agent and address of Florida. Responsible to the purpose of Changing its registered agent and address of Florida. Responsible to the purpose of Changing its registered agent and address of Florida. Responsible to the purpose of Changing its registered agent and address of Florida. Responsible to the purpose of Changing its registered agent and address of Florida. Responsible to the purpose of Changing its registered agent and address of Florida. Responsible to the purpose of Changing its registered agent and address of Florida. Responsible to the purpose of Changing its registered agent and address of Florida. Responsible to the purpose of Changing its registered agent and address of Florida. Responsible to the purpose of Changing its registered agent and address of Florida. Responsible to the purpose of Changing its registered agent and address of Florida. Responsible to the purpose of Changing its registered agent and address of Florida. Responsible to the purpose of Changing its registered agent and address of Florida. Responsible to the purpose of Changing its registered agent and address of Florida.

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: MARCELO NETTO V/P 01/27/2009