2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006150

Entity Name: NIA GROUP, INC.

FILED Jun 17, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

17100 N.E. 19TH AVENUE 767 S. STATE ROAD 7 NORTH MIAMI BEACH, FL 33162

SUITE 20

MARGATE, FL 33068

Current Mailing Address: New Mailing Address:

767 S. STATE ROAD 7 SUITE 20 17100 N.E. 19TH AVENUE

NORTH MIAMI BEACH, FL 33162

MARGATE, FL 33068

FEI Number: 65-0712638 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JACKSON, MARK A JACKSON, BEATRICE S 17100 N.E. 19TH AVENUE 10205 SUNRISE LAKES BLVD.

NORTH MIAMI BEACH, FL 33162 #105 SUNRISE, FL 33322

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: BEATRICE S. JACKSON 06/17/2004

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete Name:

JACKSON, MARK JACKSON, BEATRICE S Name: 921 N.E. 182ND TERRACE Address: 10205 SUNRISE LAKES BLVD. #105 Address:

City-St-Zip: N. MIAMI BEACH, FL 33162 City-St-Zip: SUNRISE, FL 33322

(X) Change () Addition Title: () Delete Title: Name: JOHNS, CLAUDIA Name: MELENDEZ, RONALD D

Address: 530 N.W. 152ND STREET Address: 84 LAWRENCE STRTEET City-St-Zip: N. MIAMI, FL 33169 City-St-Zip: METHUEN, MA 01844

Title: () Delete Title: SD (X) Change () Addition FERGUSON, VALARIE Name: MOORE, AURELIA Name:

130 NW 193 STREET 449 HOMELAND ROAD Address: Address: City-St-Zip: MIAMI, FL 33169 City-St-Zip: PORT ST. LUCIE, FL 34953

Title: () Delete Title: () Change (X) Addition

Name: Name: RANGE, RONALD S 10995 NW 26TH PLACEE Address: Address: City-St-Zip: City-St-Zip: SUNRISE, FL 33322

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BEATRICE S. JACKSON D 06/17/2004