2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006150

Entity Name: NIA GROUP, INC.

FILED Apr 25, 2006 Secretary of State

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

767 S. STATE ROAD 7 SUITE 20 MARGATE, FL 33068

Current Mailing Address: New Mailing Address:

767 S. STATE ROAD 7 SUITE 20 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:

MELENDEZ, RONALD D
6010 SOUTH FALLS CIRCLE DRIVE
212

JACKSON, SOYICA D
4910 NW 16TH ST.
LAUDERHILL, FL 33313 US

LAUDERHILL, FL 33319 US

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: SOYICA JACKSON 04/25/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 WHEELER, KATINA
 Name:
 JACKSON, SOYICA

 Address:
 3070 SOUTH OAKLAND FORREST DRIVE #301
 Address:
 4910 NW 16TH ST.

 City-St-Zip:
 OAKLAND PARK, FL 33309
 City-St-Zip:
 LAUDERHILL, FL 33313

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

Name: MELENDEZ, RONALD D Name: MELENDEZ, MARISA
Address: 6010 SOUTH FALLS CIRCLE DRIVE #212 Address: 10995 NW 26TH PLACE

City-St-Zip: LAUDERHILL, FL 33319 City-St-Zip: SUNRISE, FL 33322

Title: SD () Delete Title: S (X) Change () Addition Name: MOORE, AURELIA Name: ROLLE, ANGELA

Address: 449 HOMELAND ROAD Address: 190 NE 213 ST.

City-St-Zip: PORT ST. LUCIE, FL 34953 City-St-Zip: MIAMI, FL 33179

Title: O () Delete Title: () Change () Addition

 Name:
 RANGE, RONALD S
 Name:

 Address:
 10995 NW 26TH PLACEE
 Address:

 City-St-Zip:
 SUNRISE, FL 33322
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SOYICA JACKSON D 04/25/2006