2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 28, 2004 8:00 am Secretary of State

ANNUAL REPORT					Secretary of State			
DOCUMENT # P00000031508 1. Entity Name					04-28-	2004 90192 049 **	**15 0.00	
	DWELL GROUP, INC.							
Principal Plac	e of Business	Mailing Address				940701	02	
	TH 95TH AVENUE 33478-9305	PO BOX 7794 Jupiter, FL 33468-774	4					
2. Principal Place of Business 4580 Northwest 11.4th Ave 4580 Northwest Suite Apt. # etc. Suite Apt. # etc.			114th A	ve				
Suite	1202	Suite, Apt. #, etc. Suite 1202		0403200	4 Chg-P	CR2E034 (10/03)		
City & State Miami,	Florida	City & State Miami, Florida		4. FEI Nui 65-0	nber 996626	₩	plied For t Applicable	
Zip 33178	Country	Zip -331-78	Country	5. Certific	ate of Status Desired	□ \$8.75 Add		
	6. Name and Address of Current			7. Name a	nd Address of New			
CARDWEI			Name	Name				
CARDWELL, ROBERT F JR 15767 NORTH 95TH AVENUE JUPITER, FL 33478-9305			Street A 458	Street Address (P.O. Box Number is Not Acceptable) 4580 Northwest 114th Avenue Suite 1202				
			City	FL ^{Zig} 339 ⁴ 78				
8. The above named entity submits this statement for the burpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Fina Trust Fund Contribution				\$5.00 May Be Added to Fees				
10.	OFFICERS AND	DIRECTORS	11.	ADDITIO	I IS/CHANGES TO OF	FICERS AND DIRECTORS	\$ IN 11	
TITLE	PST	☐ Delete	TITLE			K Change	Addition	
NAME STREET ADDRESS	CARDWELL, JR, ROBERT F	RDWELL, JR, ROBERT F 767 NORTH 95TH AVENUE STREE			4580 Northwest 114th Avenue #1202			
CITY-ST-ZIP	JUPITER, FL 334789305			Miami, Flo	Miami, Florida 33178			
TITLE		☐ Delete	TITLE			Change	☐ Addition	
NAME Street address			NAME STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE		Delete -	TITLE	سيشيون		Change -	- Addition •	
STREET ADDRESS			NAME STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE NAME		☐ Delete	TITLE			☐ Change	☐ Addition	
STREET ADDRESS			NAME STREET ADDRESS					
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NAME STREET ADDRESS			NAME STREET ADDRESS		•			
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE		☐ Delete	TITLE			☐ Change	Addition	
NAME STREET ADDRESS			NAME Street address		•			
CITY-ST-ZIP	7		CITY-ST-ZIP					
, 12. I hereby of	certify that the information supplied with	this fing does not qualify for the	ne exemption state	ted in Section 119.07	3)(i), Florida Statutes	. I further certify that the in	nformation or director	

12. I hereby certify that the information supplied with this tring does not qualify 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 the and acceptate and that my 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 1 the chapter 607 or an attachment with an address, with all other like empowered.

Robert F. Cardwell, Jr
SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-12-04

305-790-476

Daytime Phone #