2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000061333

Entity Name: CAS GROUP, INC.

FILED May 17, 2005 Secretary of State

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

3141 COMMERCE PARKWAY MIRAMAR, FL 33025

Current Mailing Address: New Mailing Address:

3141 COMMERCE PARKWAY MIRAMAR, FL 33025

FEI Number: 65-1024178 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:

MURAI WALD BIONDO & MORENO, P.A. 900 INGRAHAM BUILDING 25 S.E. 2ND AVENUE MIAMI, FL 33131 US MURAI WALD BIONDO & MORENO, P.A. 2 ALHAMBRA PLAZA, PENTHOUSE 1B CORAL GABLES, FL 33134 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: 05/17/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 GARGANTA, ANDRES
 Name:
 GARGANTA, ANDRES

 Address:
 9933 S.W. 21ST STREET
 Address:
 9933 S.W. 21ST STREET

City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL

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

 Name:
 MALLOL, CARLOS
 Name:
 MALLOL, CARLOS

 Address:
 7361 SW 123RD PLACE
 Address:
 7361 SW 123RD PLACE

City-St-Zip: MIAMI, FL City-St-Zip: MIAMI, FL

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

 Name:
 Name:
 HERNANDEZ, WILMA

 Address:
 Address:
 833 N. NORTHLAKE DRIVE

 City-St-Zip:
 City-St-Zip:
 HOLLYWOOD, FL 33019

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

 Name:
 Name:
 PLATT, MICHAEL

 Address:
 Address:
 424 LLAMA COURT

 City-St-Zip:
 City-St-Zip:
 APOPKA, FL 32750

 $\label{eq:title:title:V} \textit{Title:} \qquad \textit{V} \qquad \textit{() Change (X) Addition}$

 Name:
 Name:
 CHAVEZ, EVELIO

 Address:
 Address:
 8760 SW 85TH STREET

City-St-Zip: City-St-Zip: MIAMI, FL

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

SIGNATURE: CARLOS MALLOL DPT 05/17/2005