## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000061333

Entity Name: CAS GROUP, INC.

City-St-Zip:

MIAMI, FL

FILED Mar 26, 2008 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. 2 ALHAMBRA PLAZA, PENTHOUSE 1B CORAL GABLES, FL 33134 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition GARGANTA, ANDRES Name: Name: 9933 S.W. 21ST STREET Address: Address: City-St-Zip: MIAMI, FL City-St-Zip: Title: DPT Title: () Delete () Change () Addition Name: MALLOL, CARLOS Name: 7361 SW 123RD PLACE Address: Address: City-St-Zip: MIAMI, FL City-St-Zip: Title: Title: () Delete () Change () Addition HERNANDEZ, WILMA Name: Name: 833 N. NORTHLAKE DRIVE Address: Address: City-St-Zip: HOLLYWOOD, FL 33019 City-St-Zip: Title: () Delete Title: () Change () Addition PLATT, MICHAEL Name: Name: Address: 424 LLAMA COURT Address: City-St-Zip: APOPKA, FL 32750 City-St-Zip: Title: ( ) Delete Title: () Change () Addition CHAVEZ, EVELIO Name: Name: 8760 SW 85TH STREET Address: Address:

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

City-St-Zip:

SIGNATURE: CARLOS MALLOL DPT 03/26/2008