


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P00000097240 1. Entity Name ROXY ENTERPRISES GROUP, INC.	
---	---

Principal Place of Business 13914 SW 46TH TERR UNIT C MIAMI, FL 33175	Mailing Address 13914 SW 46TH TERR UNIT C MIAMI, FL 33175
---	---



2. Principal Place of Business	3. Mailing Address	04282006 Chg-P CR2E034 (11/05)
Suite, Apt #, etc	Suite, Apt #, etc.	
City & State	City & State	4. FEI Number 65-1049880
Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required

Applied For	Not Applicable
-------------	----------------

6. Name and Address of Current Registered Agent

**GONZALEZ, JESUS
14339 S.W. 45TH TERRACE
MIAMI, FL**

7. Name and Address of New Registered Agent

Name _____

Street Address (P.O. Box Number is Not Acceptable) _____

City _____ **FL** Zip Code _____

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE	PD GONZALEZ, JESUS <input type="checkbox"/> Delete
NAME	13914 SW 46TH TERR
STREET ADDRESS	MIAMI, FL 33175
CITY - ST - ZIP	
TITLE	STD GONZALEZ, JOSE A <input type="checkbox"/> Delete
NAME	14339 S.W. 45TH TERRACE
STREET ADDRESS	MIAMI, FL
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	U00000544241 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	05/11/06-80027-019 150.00
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ **JESUS GONZALEZ PRESIDENT 04/27/2006 786 287 9746**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #