

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000105870

Entity Name: CLEVER GROUP, INC.

FILED
Jul 02, 2008
Secretary of State

Current Principal Place of Business:

1005 W OAKRIDGE ROAD
SUITE 1
ORLANDO, FL 32809

New Principal Place of Business:

14013 ISLAMORADA DR.
ORLANDO, FL 32837

Current Mailing Address:

1005 W OAKRIDGE ROAD
SUITE 1
ORLANDO, FL 32809

New Mailing Address:

14013 ISLAMORADA DR.
ORLANDO, FL 32837

FEI Number: 59-3681067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUEVAS, ANDREW ESQ
536 BILTMORE WAY
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GONCALVES, JOSEMIGUEL
Address: 1005 W OAKRIDGE ROAD SUITE 1
City-St-Zip: ORLANDO, FL 32809

Title: PVST () Delete
Name: GONCALVES, JOSEMIGUEL
Address: 1005 W OAKRIDGE ROAD SUITE 1
City-St-Zip: ORLANDO, FL 32809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GONCALVES, JOSE M
Address: 14013 ISLAMORADA DR.
City-St-Zip: ORLANDO, FL 32837

Title: PVST (X) Change () Addition
Name: GONCALVES, JOSE M
Address: 14013 ISLAMORADA DR.
City-St-Zip: ORLANDO, FL 32837

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.

SIGNATURE: JOSE GONCALVES

D

07/02/2008

Electronic Signature of Signing Officer or Director

Date