2004 FOR PROFIT CORPORATION

May 14, 2004 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # P01000022251** 05-14-2004 90007 023 ***150.00 1. Fotity Name CPI GROUP, INC. Principal Place of Business Mailing Address 4302 HENDERSON BOULEVARD 4302 HENDERSON BOULEVARD 54054416 SUITE 104 SUITE 104 TAMPA, FL 33629 TAMPA, FL 33629 2. Principal Place of Business 3. Mailing Address 6209 03062003 CR2E034 (10/03) Cha-P Applied For 4. FEI Number City & State 59-3707142 Not Applicable Zìp Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required - -6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name EISENBERG, MICHAEL Street Address (P.O. Box Number is Not Acceptable) 6209 BAYSHORE R 4302 HENDERSON BLVD **SUITE 104** TAMPA, FL 33629 Zio Code 33 6 // AMPA 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) A163 FILE NOW!!!, FEE 18,\$150.00 ... 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Due by September 8, 2004 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS RESIDENT TITLE Delete TITLE EISENBERG, MICHAEL V NAME NAME BAYSHORE Bluck STREET ADDRESS 4302 HENDERSON BOULEVARD #104 STREET ADDRESS FL 33611 CITY-ST-ZIP TAMPA, FL 33629 CITY-ST-ZIP TITLE ☐ Delete TITLE NAME LEVITT, LISA NAME STREET ADDRESS 4302 HENDERSON BOULEVARD #104 STREET ADDRESS TAMPA, FL 33629 CITY-ST-ZIP CITY-ST-ZIP Delete ... TITLE __ . Change - Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Delete ☐ Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing 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 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.

MICHAEL

FILED



P010000222 6209 Bayhsore Blvd. Tampa, FL 33611

Phone: 813-254-6112

May 12, 2004

Florida Department of State:

I have in the past received a renewal form and have not received it this year. I expected the renewal date was 5/15, and searched your website this morning for a phone number to contact your office and was surprised to find the filing date was 5/1. Please wave any late fee as I did not receive any forms this year and as the imposition of any fee would be onerous to my business.

Thank you,

Michael Eisenberg

PS: DATE SHOWN ON FORM SAYS DUO SEPT. B, 2004