

**02 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

FILED

02 NOV 12 AM 11:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **PD1000061195**  
1. Entity Name  
**CONCEPT SOLUTIONS GROUP, INC.**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business <b>13701 SW 88 ST.</b>		3. Mailing Address <b>13701 SW 88 ST.</b>	
Suite, Apt. #, etc. <b>300</b>		Suite, Apt. #, etc. <b>300</b>	
City & State <b>Miami, FL</b>		City & State <b>FL</b>	
Zip <b>33186</b>	Country <b>USA</b>	Zip <b>33186</b>	Country <b>USA</b>

DO NOT WRITE IN THIS SPACE

4. FEI Number  
**65-1114196**  Applied For  
Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional  
Fee Required --

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
**SPIEGEL & UTRERA, P.A.**

Street Address (P.O. Box Number is Not Acceptable)  
**243 ALMERIA AVE.**

City  
**CORAL GABLES** **FL** Zip Code  
**33134**

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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>PRESIDENT ANTHONY MARTINEZ 12365 SW 151 ST, APT. C-203 Miami, FL 33186</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>500008900745 11/12/02--01009--001 **150.00</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>JEFF HAJNY VICE-PRESIDENT 15432 SW 77 Circle Ln. #101 Miami, FL 33193</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
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13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE *Anthony Martinez* **10/31/2001** **305-380-1990**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)

CSG  
**Concept Solutions Group, Inc.**

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13701 North Kendall Drive  
Suite 300  
Miami, FL 33186

Tel: 305-380-1990  
Fax: 305-380-8011  
Website: [www.conceptsolutions.net](http://www.conceptsolutions.net)

October 31, 2002

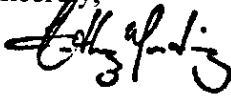
Uniform Business Report  
Division of Corporation  
P.O. Box 1500  
Tallahassee, FL 32302-1500

To Whom It May Concern:

Please be advised that we have not received any prior notices regarding the For Profit Corporation Uniform Business Report (UBR). I believe that you have our old address on file, therefore, I would like to inform you of our current address, which is as follows: 13701 N. Kendall Drive, Suite 300, Miami, FL 33186. Any future correspondence should be forwarded to this address. Thank you for your attention to this matter.

If you should have any further questions or comments, please don't hesitate to contact me.

Sincerely,



Anthony Martinez