2002 UNIFORM BUSINESS REPORT (UBR)

Mailing Address

465 OCEAN DR., STE. 905

DOCUMENT# P01000099047 1. Entity Name

C. G. MANAGEMENT GROUP, INC.

Principal Place of Business

465 OCEAN DR., STE. 905

FILED Jul 09, 2002 8:00 am Secretary of State 07-09-2002 90376 047 ***150.00

MIAMI BEACH FE 33139						1					
2. Principal Place of Business			3. Mailing Address	3. Mailing Address			- I PRENIDEN NY DENER NAON' BEN'NY BEN'N I				
Suite, Apt. #, etc.			Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & Stat	е		City & State	City & State			FEI Number 22~3835229		_ `	plied For t Applicable	
Zip		Country Zip Co		Coun	ntry				8.75 Add	litional	
6. Name and Address of Current Registered Agent						7-1	Name and Address of New Regis	stered Ac	ent		
					Name				<u></u>		
COLLINS, KEITH					Street Address (P.O. Box Number is Not Acceptable)						
421 E. CE	ntral bl	VD., #1314				•	• •				
ORLANDO	ORLANDO FL 32801										
	•				City			FL	Zin Code	i	
	named entit ions of regist		for the purpose of changing i	ts registere	ed office or regist	ered ag	gent, or both, in the State of Florida	a. I am fa	miliar with,	and accept	
SIGNATURE.	Signature, typed	or printed name of registered age	ent and title if applicable. (NC	OTE: Registere	d Agent signature requir	ed when re	reinstating)	DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! FEI After September 13, 2002 Make Check Payable to I				13, 2002 I	Fee will be \$750		10. Election Campaign Financ Trust Fund Contribution.	ing _		May Be to Fees	
11.		OFFICERS AN	ID DIRECTORS	12.		AC	DDITIONS/CHANGES TO OFFICE	RS AND E	DIRECTORS	IN 11	
TITLE	PCEO		☐ Delete	TITLE					☐ Change	☐ Addition	
NAME	GIANNOTTI, CHRISTIAN			NAM	E			_	_ •		
STREET ADDRESS	DORESS 465 OCEAN DR., STE. 905			STRE	ET ADDRESS					ì	
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NAME				NAME				•			
STREET ADDRESS		•		STREE	ET ADDRESS						
City-St-21P				CITY-	·ST-ZIP						
13. Thereby o	ertify that the	e information supplied w	ith this filing does not qualify f	or the exer	motion stated in S	ection :	119 07(3)(i) Florida Statutes Liture	her certifi	that the in	formation	
indicated	on this reno	t or supplied w	t is true and accurate and that	mv sinnat	option stated iff a	eame	119.07(3)(i), Florida Statutes. I furt legal effect as if made under oath.	that Lam	y unat the III	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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

AHachment BOI27854

7/4/02

C.G. Management Group, Inc. 465 Ocean Dr. #905 M.B., FL 33139 Doc# PØIØØØØ99Ø47 FEI# 22-3835229

To Whom It May Concern:

I would like to first apologize for this inconvenience, but according to my records we had filed the UBR, via the internet, back on March 10th of this year. According to the copy attached of the original form that was filled out, but was filed ON-LINE instead, you can verify that the date was 3/10/02. I hope that you can accept our apologies if we were unsuccessful in completing the filing process or if it was done incorrectly. We have every intention to do our best in complying with you rules and regulations. Please accept this as a correction to the mistake if your records show otherwise. Honestly, can't find a confirmation number at this time! The only proof is the note in our records and the original filing form that was filled out and was ready to be submitted before we decided to do it ON-LINE.

Again, we hope that you can be compassionate and understanding for our lack of follow through and confirmation data.

Sincerely,

Christian Giannotti

PS: Happy 4th of July!

2002 UNIFORM BUSINESS REPORT (UBR)

B0127854

I. Entity Nan		# P0100 NT GROUP, INC.	00099047	AH	Serch	ma	+			,	
Principal Place 165 OCEAN C MIAMI BEACH			Mailing Address 465 OCEAN DR. STE. 905 MIAMI BEACH FL 33139								
	Place of Busir	ness	3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State			City & State	City & State			4. FEI Number 22-3835229 N				
Zip		Country	Zip	Count	try	5.	Certificate of Status Desired		8.75 Ade		
	6. Name	and Address of Current	Registered Agent		Name	7. 1	Name and Address of New Registe	red Ag	ent		
COLLINS, KEITH 421 E. CENTRAL BLVD., #1314 ORLANDO FL 32801					Street Ac	Address (P.O. Box Number is Not Acceptable)					
CHEMICO PE SERVI							<u> </u>	FL Zip Code			
SIGNATURE 9. This corporate filing	Signature, typed	or printed name of registered egent ible to satisfy its Intangible and elects to do so.	and the #applicable. (NOT)	Registers II FEE 12 Fee	I Agent signet s IS \$ 150.0 will be \$50	a required when re	einsteing) 10. Election Campaign Financing Trust Fund Contribution.	NTE		O May Be	
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I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.97(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 12 or changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CHRISTIAN GIANNOTTI 3/10/02 305-535-6121