

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000099600

FILED
Apr 15, 2006
Secretary of State

Entity Name: THE VERASITY GROUP-CORPORATION

Current Principal Place of Business:

1390 SOUTH VENETIAN WAY
MIAMI, FL 33139

New Principal Place of Business:

Current Mailing Address:

1390 SOUTH VENETIAN WAY
MIAMI, FL 33139

New Mailing Address:

FEI Number: 65-1148315

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPO, DEREK
1390 SOUTH VENETIAN WAY
MIAMI, FL 33139 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROJAS, MARCO A JR
Address: 867 CAPTIVA DRIVE
City-St-Zip: HOLLYWOOD, FL 33019

Title: D () Delete
Name: RODRIGUEZ, MICHAEL
Address: 621 SW 1ST STREET
City-St-Zip: HALLANDALE, FL 33009

Title: D () Delete
Name: GARCIA, SENEN D III
Address: 15532 SW 55 TERRACE
City-St-Zip: MIAMI, FL 33185

Title: D () Delete
Name: VERGARA, OSCAR
Address: 1375 NORMANDY DR
City-St-Zip: MIAMI BEACH, FL 33141

Title: D () Delete
Name: SILVIA, ANDREW
Address: 15529 SW 36 TERR.
City-St-Zip: MIAMI, FL 33185

Title: D () Delete
Name: CAPO, DEREK
Address: 1390 S VENETIAN WAY
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: DEREK CAPO

D

04/15/2006

Electronic Signature of Signing Officer or Director

Date