

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 23, 2007 8:00 am**  
**Secretary of State**

04-23-2007 90273 007 \*\*\*150.00

<b>DOCUMENT # P01000112499</b>					
<b>1. Entity Name</b> THE CURTISS GROUP INTERNATIONAL- N.E. INC.					
<b>Principal Place of Business</b> <del>5458 N. UNIVERSITY DRIVE</del> <del>LAUDERHILL, FL 33351</del>			<b>Mailing Address</b> C/O FERGUSON & FERGUSON 5458 N. UNIVERSITY DRIVE LAUDERHILL, FL 33351		
<b>2. Principal Place of Business - No P.O. Box #</b> 7120 S.W. 5th St.		<b>3. Mailing Address</b> C/O FERGUSON & FERGUSON 7120 S.W. 5th St.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02202007    Chg-P    CR2E034 (12/06)	
<b>City &amp; State</b> PLANTATION, FL.		<b>City &amp; State</b> PLANTATION, FL		<b>4. FEI Number</b> 65-1158314	
<b>Zip</b> 33317		<b>Country</b> BROWARD		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> \$8.75 Additional Fee Required	
<b>6. Name and Address of Current Registered Agent</b>  FERGUSON, G. ARNOTT 5458 N. UNIVERSITY DRIVE LAUDERHILL, FL 33351			<b>7. Name and Address of New Registered Agent</b> Name: <b>G. ARNOTT FERGUSON</b> Street Address (P.O. Box Number is Not Acceptable): 7120 S.W. 5th STREET City: <b>PLANTATION</b> <b>FL</b> Zip Code: <b>33317</b>		
<b>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.</b>  SIGNATURE:     DATE: <b>4-17-07</b> <small>Signature typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>		<b>9. Election Campaign Financing</b> <input type="checkbox"/> \$5.00 May Be Added to Fees			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete FRANK, WILLIAM E JR 1900 N KROME AVE STE G HOMESTEAD, FL 33030	TITLE NAME STREET ADDRESS CITY-ST-ZIP	FRANK, WILLIAM E. JR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7120 S.W. 5th STREET PLANTATION, FL 33317		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.</b>					
<b>SIGNATURE:</b>		DATE: <b>4-17-07</b> Daytime Phone #			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <b>WM. E. FRANK JR.</b>					