2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 23, 2004 8:00 am Secretary of State

DOCUMENT # P02000049682 07-23-2004 90006 005 ***150.00 YES INVESTMENT GROUP, INC. Principal Place of Business Mailing Address 7221 SW 5TH TERRACE 7221 SW 5TH TERRACE 44049596 MIAMI, FL 33144 MIAMI, FL 33144 2. Principal Place of Business 3. Mailing Address Suite. Apt. #. etc. Suite, Apt. #, etc. 07072004 CR2E034 (10/03) Chq-P City & State City & State 4. FEI Number Applied For 02-0594398 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required ~7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent LIBERTY BUSINESS SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 8204 NW 103RD STREET HIALEAH GARDENS, FL 33016 City Zip Code 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE; Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 8, 2004 Added to Fees corporation did not receive the prior notice. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. D TITLE ☐ Change ☐ Addition TITLE Delete RODRIGUEZ, ROGELIO L NAME NAME STREET ADDRESS 7221 SW 5TH TERRACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33144 Delete TITLE D Change ☐ Addition TITLE TARRAU, EDGAR E NAME NAME STREET ADDRESS STREET ADDRESS 13311 NW 1ST LANE MIAMI, FL 33182 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete THILE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP - Addition Delete TITLE - Change NAME NAME STREET ADDRESS STREET ADDRESS 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 suppliemental 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 the empowered.

SIGNATURE:

CONTRACTOR AND THE CONTRACTOR OF STREET PROPERTY OF STREET

Date

Daytime Phone #