2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P02000102444

SIGNATURE:



FILED Apr 10, 2003 8:00 am Secretary of State

1. Entity Name THE DEG GROUP, INC.)	04-10-2003 90083 048 ****150.00				
Principal Place of Business 9955 SW 214 STREET MIAMI FL 33189		Mailing Address 9955 SW 214 STREET MIAMI FL 33189	9955 SW 214 STREET							
2. Principal Place of Business		3. Mailing Address			-					
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State		City & State				El Number 0-0/18012			Applied For Not Applicable	
Zip Country		Zip	Zip Countr		_~~	Certificate of Status Desired		8.75 A ee Requi	Additional ired	
	6. Name and Address of Currer	nt Registered Agent			7. N	Name and Address of New Regi	stered A	gent		
				Name						
GARDNER, DAVID Street Add 9955 SW 214 STREET					(P.O. B	ox Number is Not Acceptable)			·	
MIAMI FL :	33189			City		<u> </u>	FL	Zip Co	ode	
8. The above the obliga SIGNATURE	e named entity submits this statement tions of registered agent. Signature, typed or printed name of registered age			d office or registe			a. I am fa	miliar wit	h, and accept	
Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department					Election Campaign Financ Trust Fund Contribution.	cing		.00 May Be led to Fees	
10.	OFFICERS AN	D DIRECTORS	11.		AD	DITIONS/CHANGES TO OFFICE	RS AND I	DIRECTO		
	D Gardner, David 9955 SW 214 Street Miami Fl 33189	☐ Delete		.T ADORESS ST-Zip				☐ Change	e	
	D GARDNER, BARBARA J 9955 SW 214 STREET MIAMI FL 33189	☐ Delete		T ADDRESS ST-ZIP				☐ Change	e	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ş- ti	☐ Delete		T ADDRESS ST-ZIP	= -			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREE					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	٠.	☐ Deláte		T ADDRESS ST-ZIP			!	☐ Change	e	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		t address St-zip				☐ Change	Addition	
indicated of the co	certify that the information supplied wi I on this report or supplemental report poration or the receiver or trustee em , or on an attachment with an address	is true and accurate and the powered to execute this rep	at my signatu ort as require	ire shall have the	same li	egal effect as if made under oath	ı; that I an	n an offici	er or director	

Barbara J. Gardner