2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000125995

Entity Name: VECELLIO GROUP, INC.

FILED Mar 02, 2005 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
101 SANSBURY'S WAY WEST PALM BEACH, FL 33411						
Current Mailing Address:			New Maili	New Mailing Address:		
PO BOX 15065 WEST PALM BEACH, FL 33416						
FEI Number: 22-3884861 FEI Number Applied For () FEI Num		Number Not Appl	icable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
DEFREHN, JOHN A 101 SANSBURY'S WAY WEST PALM BEACH, FL 33411 US						
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:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	ST () C DEFREHN, JOHN 8645 PINE CAY WEST PALM BEA		Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	VPD () E VECELLIO, MICH 210 VIA DEL MAR PALM BEACH, FL	र	Title: Name: Address: City-St-Zip:	VPD (X) Change () Addition VECELLIO, MICHAEL A 209 VIA LINDA PALM BEACH, FL 33480		
Title: Name: Address: City-St-Zip:	PD () C VECELLIO, LEO A 210 VIA DEL MAR PALM BEACH, FL	₹	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VPD () C VECELLIO, KATH 210 VIA DEL MAR PALM BEACH, FL	₹	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	VPD () C VECELLIO, CHRI 217 VIA LINDA PALM BEACH, FL		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	VP () E BASHAW, DAVID 101 SANSBURY'S WEST PLAM BEA	S WAY	Title: Name: Address: City-St-Zip:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN A DEFREHN ST 03/02/2005