

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000128087

FILED  
Jul 27, 2008  
Secretary of State

Entity Name: COUNTERPOINT GROUP, INC.

## Current Principal Place of Business:

1440 CORAL RIDGE DRIVE  
SUITE 351  
CORAL SPRINGS, FL 33071 US

## New Principal Place of Business:

6820 LYONS TECHNOLOGY CIRCLE  
SUITE 240  
COCONUT CREEK, FL 33073 US

## Current Mailing Address:

1440 CORAL RIDGE DRIVE  
SUITE 351  
CORAL SPRINGS, FL 33071 US

## New Mailing Address:

FEI Number: 81-0586176      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KAPLAN, JAN H  
1440 CORAL RIDGE DRIVE  
SUITE 351  
CORAL SPRINGS, FL 33071 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: KAPLAN, JAN H  
Address: 1440 CORAL RIDGE DRIVE SUITE 351  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D ( ) Change (X) Addition  
Name: MAYER, DAVID  
Address: 665 LAKEWOOD CIRCLE EAST  
City-St-Zip: DELRAY BEACH, FL 33445

I hereby certify that the information supplied with this filing does not qualify 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: JAN KAPLAN

PD

07/27/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date