2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000025715

1. Entity Name GROUP BETA.COM, INC.



FILED Mar 17, 2008 08:00 A Secretary of State

Principal Place of Business

Mailing Address

8306 MILLS DRIVE

#390

MIAMI, FL 33183-4838

8306 MILLS DRIVE #390

MIAMI, FL 33183-4838



	OO	NOT	WRITE	IN	THIS	SPACE
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CR2E034 (11/05) 01172008 No Chg-P

4. FEI Number 43-2007588 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BEDOYA, MAURICIO 8306 MILLS DRIVE #390 MIAMI, FL 33183

SIGNATURE:

DO NOT WRITE IN THIS SPACE

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 tritle if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
FILE NOWILL FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution.				\$5.00 May Be Added to Fees						
10. ·	OFFICERS AND DIREC	TORS			,					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEDOYA, MAURICIO 8306 MILLS DRIVE #390 MIAMI, FL 331834838				,					
TITLE										
NAME Street address					U00000859807 04/02/08-80037-017 150.00					
CITY-ST-ZIP			_		04/02/08-80037-017 150.00					
TITLE NAMÉS			1							
STREET ADDRESS				DO	NOT WRITE					
CITY-ST-ZIP			_							
TITLE Name				IN '	THIS SPACE					
STREET ADDRESS										
CITY-ST-ZIP			_							
TITLE										
NAME STREET ADDRESS										
CITY-ST-ZIP										
TITLE										
NAME STREET ADDRESS										

12. I hereby certify that the information supplied with this filling 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 attack most light an address, with all other like empowered.

INTED NAME OF SIGNING OFFICER OR DIRECTOR