## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000032502

Entity Name: DANTE'S GROUP INC.

**FILED** Feb 23, 2005 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**Current Principal Place of Business: New Principal Place of Business:** 

8353 SOUTH WEST 161 PLACE 10421 SW 157 PL MIAMI, FL 33193 **APT 305** 

MIAMI, FL 33196

**Current Mailing Address: New Mailing Address:** 

8353 SOUTH WEST 161 PLACE 10421 SW 157 PL APT 305 MIAMI, FL 33193

MIAMI, FL 33196

FEI Number: 81-0609752 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FONTALVO, OSCAR J FONTALVO, OSCAR J 8353 SOUTH WEST 161 PLACE 10421 SW 157PL MIAMI, FL 33193 **APT 305** US

MIAMI, FL 33196 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: 02/23/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

( ) Delete Title: (X) Change ( ) Addition

Title: FONTALVO, OSCAR FONTALVO, OSCAR Name: Name: 8353 SOUTH WEST 161 PLACE 10421 SW 157 PL APT 305 Address: Address:

City-St-Zip: MIAMI, FL 33193 City-St-Zip: MIAMI, FL 33196

Title: () Delete Title: VΡ (X) Change ( ) Addition

FONTALVO, AUDREY Name: Name: FONTALVO, AUDREY 8353 SOUTH WEST 161 PLACE Address: 8353 SOUTH WEST 161 PLACE Address:

MIAMI, FL 33193 MIAMI, FL 33193 City-St-Zip: City-St-Zip:

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: OSCAR FONTALVO PD 02/23/2005