

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000047734

FILED
Apr 24, 2004
Secretary of State

Entity Name: DS BUSINESS GROUP, INC.

Current Principal Place of Business:

6929 NW 46 STREET
MIAMI, FL 33166

New Principal Place of Business:

1876 N. UNIVERSITY DRIVE
200-E
PLANTATION, FL 33322

Current Mailing Address:

6929 NW 46 STREET
MIAMI, FL 33166

New Mailing Address:

1876 N. UNIVERSITY DRIVE
200-E
PLANTATION, FL 33322

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WASHOFSKY, MARTINE E EA
6929 NW 46 STREET
MIAMI, FL 33166

Name and Address of New Registered Agent:

WASHOFSKY, MARTINE E EA
1876 N. UNIVERSITY DRIVE
200-E
PLANTATION, FL 33322

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: M. E. WASHOFSKY, EA

04/24/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SCHIBUOLA, DINO
Address: 3802 NE 207TH STREET #501
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SCHIBUOLA, UBALDO
Address: 3802 NE 207TH STREET #501
City-St-Zip: AVENTURA, FL 33180

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: U. SCHIBUOLA

D

04/24/2004

Electronic Signature of Signing Officer or Director

Date