

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000052462

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Entity Name:** THE SOUTH OCEAN GROUP, INC.

**Current Principal Place of Business:**

90 SE 4TH AVENUE, STE. 1  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

1034 S OCEAN BLVD  
DELRAY BEACH, FL 33483

**Current Mailing Address:**

90 SE 4TH AVENUE, STE. 1  
DELRAY BEACH, FL 33483

**New Mailing Address:**

1034 S OCEAN BLVD  
DELRAY BEACH, FL 33483

**FEI Number:** 54-2116268

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLIFFORD, MALORY P  
90 SE 4TH AVENUE, STE. 1  
DELRAY BEACH, FL 33483 US

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

CLIFFORD, MALORY P  
1034 S OCEAN BLVD  
DELRAY BEACH, FL 33483 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

04/26/2012

Date

**OFFICERS AND DIRECTORS:**

Title: PS  
Name: CLIFFORD, MALORY P  
Address: 1034 S OCEAN BLVD  
City-St-Zip: DELRAY BEACH, FL 33483

I hereby 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 all other like empowered.

SIGNATURE: MALORY CLIFFORD

PS

04/26/2012

Electronic Signature of Signing Officer or Director

Date