

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000057776

FILED  
Aug 09, 2007  
Secretary of State

Entity Name: THE CORAL GABLES GROUP, INC.

## Current Principal Place of Business:

3001 PONCE DE LEON BLVD.  
SUITE 102  
CORAL GABLES, FL 33134

## New Principal Place of Business:

1500 PONCE DE LEON BLVD.  
SECOND FLOOR  
CORAL GABLES, FL 33134

## Current Mailing Address:

3001 PONCE DE LEON BLVD.  
SUITE 102  
CORAL GABLES, FL 33134

## New Mailing Address:

1500 PONCE DE LEON BLVD.  
SECOND FLOOR  
CORAL GABLES, FL 33134

FEI Number: 20-2905989

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FERNANDEZ, MARIO  
3001 PONCE DE LEON BLVD., SUITE 102  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

FERNANDEZ, MARIO  
1500 PONCE DE LEON BLVD.  
SECOND FLOOR  
CORAL GABLES, FL 33134 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:

08/09/2007

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: P ( ) Delete  
Name: FERNANDEZ, MARIO  
Address: 3001 PONCE DE LEON BLVD., SUITE 102  
City-St-Zip: CORAL GABLES, FL 33134

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FERNANDEZ, MARIO  
Address: 1500 PONCE DE LEON BLVD., SECOND FLOOR  
City-St-Zip: CORAL GABLES, FL 33134

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: MARIO FERNANDEZ

P

08/09/2007

Electronic Signature of Signing Officer or Director

Date