
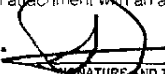


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000072753		
1. Entity Name IMPORTEX GROUP, INC.		
Principal Place of Business 945 SOUTH FEDERAL HWY DEERFIELD BEACH, FL 33441		Mailing Address 945 SOUTH FEDERAL HWY DEERFIELD BEACH, FL 33441
DO NOT WRITE IN THIS SPACE		
		04282006 No Chg-P CR2E034 (11/05)
		4. FEI Number 20-0070529
		Applied For Not Applicable
		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent TAVARES NOGUEIRA, ANTONIO M 1040 CRYSTAL LAKE DR #2 POMPANO BCH, FL 33064		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 _____ (NOTE: Registered Agent signature required when reinstating)		
DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DPT TAVARES NOGUEIRA, ANTONIO M 1040 CRYSTAL LAKE DR #2 POMPANO BCH, FL 33064	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	DVS NOGUEIRA, ANA CELIA 1040 CRYSTAL LAKE DR #2 POMPANO BCH, FL 33064	
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TITLE NAME STREET ADDRESS CITY- ST- ZIP		
12. I hereby certify that the information supplied with this filing 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 attachment with an address, with all other like empowered		
SIGNATURE:  ANTONIO M. TAVARES N.		04/28/06 (954) 421-4833