

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000073752

Entity Name: THE BUZZ GROUP, INC.

FILED
Feb 11, 2004
Secretary of State

Current Principal Place of Business:

704 W. BAY ST
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

704 W. BAY ST
TAMPA, FL 33606

New Mailing Address:

FEI Number: 54-2117819

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SERRANO, MICHAEL A ESQ.
704 W. BAY ST
TAMPA, FL 33606

Name and Address of New Registered Agent:

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

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LOUIS, JASON
Address: 3917 WEST EDEN ROE CIRCLE
City-St-Zip: TAMPA, FL 33634

Title: D () Delete
Name: BEISHER, ETHAN
Address: 224 POINCIANA DR
City-St-Zip: BIRMINGHAM, AL 35209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LEWIS, JASON
Address: 3917 WEST EDEN ROC CIRCLE
City-St-Zip: TAMPA, FL 33634

Title: () Change () Addition
Name:
Address:
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: JASON LEWIS

D

02/11/2004

_____ Electronic Signature of Signing Officer or Director

_____ Date