2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P03000078454

1. Entity Name
CARDOSO GROUP, INC.

Principal Place of Business	Mailing Address
185 SE 14 TERRACE # 1404 MIAMI, FL 33131 US	185 SE 14 TERRACE # 1404 MIAMI, FL 33131 US

DO NOT WRITE IN THIS SPACE

02132008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
37-1472070	Not Applicable

5. Certificate of Status Desired   ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CARDOSO, JAVIER
185 SE 14 TERRACE
1404
MIAMI, FL 33131

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 _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing
Trust Fund Contribution.   ☐   **$5.00** May Be Added to Fees

U000000870303
04/09/08-80108-009 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	CARDOSO, JAVIER
STREET ADDRESS	185 SE 14 TERRACE, #1404
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	VSD
NAME	CARDOSO, MARIA T
STREET ADDRESS	185 SE 14 TERRACE, #1404
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: Maria teresa Cardoso   03-24-08   404 791 8715
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #