## 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## May 05, 2005 8:00 am Secretary of State **DOCUMENT # P03000095146** 1. Entity Name 05-05-2005 90106 026 \*\*\*150.00 ZEUS GROUP, INC. Principal Place of Business Mailing Address 11267 N. KENDALL DR., STE. J103 MIAMI FL 33176 11267 N. KENDALL DR., STE. J103 MIAMI FL 33176 2. Principal Place of Business 3. Mailing Address 2349-51 W 525+ Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State Applied For 4. FEI Number 51-0482527 33014 Not Applicable Country Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required MIAMI-DADE 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MAALOUF, CAROLINA Street Address (P.O. Box Number is Not Acceptable) 11267 N. KENDALL DR., STE. J103 MIAM! FL 33176 Zip Code 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 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PD ☐ Delete TITLE Change ☐ Addition MAALOUF, GRACIELA NAME NAME 11267 N. KENDALL DR., STE, J103 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33176** CITY-ST-ZIP VD TITLE ☐ Detete TITLE ☐ Change Addition MAALOUF, DEISY NAME NAME STREET ADDRESS 11267 N. KENDALL DR., STE. J103 STREET ADDRESS MIAMI FL 33176 CITY-ST-7IP CITY-ST-7IP TITLE TD ☐ Defete TITLE ☐ Change ☐ Addition MAALOUF, CAROLINA NAME MAME STREET ADDRESS STREET ADDRESS 11267 N. KENDALL DR., STE. J103 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33176** Change TITLE ☐ Delete ☐ Addition MAALOUF, NABIL 11267 N. KENDALL DR., STE. J103 STREET ADDRESS STREET ADDRESS MIAMI FL 33176 CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE TITLE Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 12. I hereby certify that the information supplied with this filing does not qualify 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 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.

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED** 

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