## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000099564

Entity Name: LEROGE GROUP, INC.

City-St-Zip:

POMPANO BCH, FL 33069

FILED Jan 07, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1287 WEST ATLANTIC BLVD. POMPANO BCH, FL 33069 **Current Mailing Address: New Mailing Address:** 1287 WEST ATLANTIC BLVD. POMPANO BCH, FL 33069 FEI Number: 54-2131687 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: UTRECHT, STEVEN T 2295 CORPORATE BLVD., UNIT 211 BOCA RATON, FL 33431 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition SHAOUY, ELIAS Name: Name: 1287 WEST ATLANTIC BLVD. Address: Address: City-St-Zip: POMPANO BCH, FL 33069 City-St-Zip: Title: Title: () Delete () Change () Addition Name: SHAOUY, ROBERT Name: 1287 WEST ATLANTIC BLVD. Address: Address: POMPANO BCH, FL 33069 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition SHAOUY, GERALDINE Name: Name: 1287 WEST ATLANTIC BLVD. Address: Address: City-St-Zip: POMPANO BEACH, FL 33069 City-St-Zip: Title: () Delete Title: () Change () Addition SHAOUY, JONA Name: Name: Address: 1287 WEST ATLANTIC BLVD. Address: City-St-Zip: POMPANO BCH, FL 33069 City-St-Zip: Title: Title: ( ) Delete () Change () Addition Name: SHAOUY, AMY Name: 1287 WEST ATLANTIC BLVD. Address: Address:

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.

City-St-Zip:

SIGNATURE: GERALDINE M. SHAOUY D 01/07/2008