2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000126654

Entity Name: GROUP 44 INC.

City-St-Zip:

POMPANO BEACH, FL 33065

FILED Sep 12, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 524 SOUTH DIXIE HIGHWAY WEST POMPANO BEACH, FL 33060 **Current Mailing Address: New Mailing Address:** 524 SOUTH DIXIE HIGHWAY WEST POMPANO BEACH, FL 33060 FEI Number: 20-2987933 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: LEVINE, MITCHELL 2461 NW 95TH AVE CORAL SPRINGS, FL 33065 US 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition LEVINE, MITCHELL Name: Name: 2461 NW 95TH AVE Address: Address: City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: Title: VΡ () Delete Title: VΡ (X) Change () Addition Name: LEVINE, JAEWI Name: LEVINE, JAEMI 2461 HW 95TH AVE 2461 HW 95TH AVE Address: Address: POMPANO BEACH, FL 33065 CORAL SPRINGS, FL 33065 City-St-Zip: City-St-Zip: Title: (X) Change () Addition Title: () Delete LEVINES, JENNIFER Name: LEVINE, JENNIFER Name: 2461 HW 95TH AVE 2461 HW 95TH AVE 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:

POMPANO BEACH, FL 33065

SIGNATURE: MITCHELL LEVINE **PRES** 09/12/2007