

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000134567

FILED
Jun 29, 2005
Secretary of State

Entity Name: THE TIPPING POINT GROUP, INC.

Current Principal Place of Business:

6950 CYPRESS ROAD
SUITE 207
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

6950 CYPRESS ROAD
SUITE 207
PLANTATION, FL 33317

New Mailing Address:

FEI Number: 55-0850907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JIMENEZ, RAMON
4391 CASPER COURT
HOLLYWOOD, FL 33021 US

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

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:

Title: P () Delete
Name: DIAZ, AMADO
Address: 9286 SW 1ST STREET
City-St-Zip: PLANTATION, FL 33324

Title: V () Delete
Name: JIMENEZ, RAMON
Address: 4391 CASPER COURT
City-St-Zip: HOLLYWOOD, FL 33021

Title: V () Delete
Name: VELASQUEZ, HERMAN
Address: 20008 HAZELTINE PLACE
City-St-Zip: ASHBURN, VA 20147

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DIAZ, AMADO
Address: 5500 SW 3 STREE
City-St-Zip: PLANTATION, FL 33317

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: AMADO DIAZ

MR

06/29/2005

Electronic Signature of Signing Officer or Director

Date