

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000010880

Entity Name: LOPEZ GROUP, INC.

FILED
May 16, 2006
Secretary of State

Current Principal Place of Business:

6198 16TH PLACE
WEST PALM BEACH, FL 33415 US

New Principal Place of Business:

2961 LAKEWORTH RD
LAKE WORTH, FL 33461 US

Current Mailing Address:

6198 16TH PLACE
WEST PALM BEACH, FL 33415 US

New Mailing Address:

2961 LAKEWORTH RD
LAKE WORTH, FL 33461 US

FEI Number: 20-0605254

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ, JOSUE
6198 16TH PLACE
WEST PALM BEACH, FL 33415 US

Name and Address of New Registered Agent:

LOPEZ, JOSUE
2961 LAKEWORTH RD
LAKE WORTH, FL 33461 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: JOSUE LOPEZ

05/16/2006

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: PTD () Delete
Name: LOPEZ, JOSUE
Address: 6198 16TH PLACE
City-St-Zip: WEST PALM BEACH, FL 33415 US

Title: VSD () Delete
Name: LOPEZ, JOB
Address: 6198 16TH PLACE
City-St-Zip: WEST PALM BEACH, FL 33415

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: LOPEZ, JOSUE
Address: 2961 LAKEWORTH RD
City-St-Zip: LAKE WORTH, FL 33461 US

Title: VSD (X) Change () Addition
Name: LOPEZ, JOB
Address: 2961 LAKEWORTH RD
City-St-Zip: LAKE WORTH, FL 33461

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: JOB LOPEZ

VSD

05/16/2006

Electronic Signature of Signing Officer or Director

Date