2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000032264

Entity Name: WE GROUP INC.

FILED Feb 09, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5815 WEDGEFIELD DRIVE ZEPHYRHILLS, FL 33541 **Current Mailing Address: New Mailing Address:** 5815 WEGEFIELD DRIVE ZEPHYRHILLS, FL 33541 FEI Number: 56-2446694 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: KURIAKOSE, GEORGE 5815 WEDGEFIELD DR US ZEPHYRHILLS, FL 33541 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 () Change () Addition NADUKUDY, JOY Name: Name: 437 GANSEVOORT BOULEVARD Address: Address: City-St-Zip: STATEN ISLAND, NY 10314 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: NADUKUDY JOY, SHERYL Name: NADUKUDY JOY, SHERLY 437 GANSEVOORT BOULEVARD 437 GANSEVOORT BOULEVARD Address: Address: STATEN ISLAND, NY 10314 City-St-Zip: STATEN ISLAND, NY 10314 City-St-Zip: Title: () Delete Title: () Change () Addition KEEPPANASSERIL, BABU M Name: Name: 376 GANSEVOORT BOULEVARD Address: Address: STATEN ISLAND, NY 10314 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition KEEPPANASSERIL, LEELAMMA B Name: Name: Address: 376 GANSEVOORT BOULEVARD Address: City-St-Zip: STATEN ISLAND, NY 10314 City-St-Zip: Title: Title: () Delete () Change () Addition KURIAKOSE, GEORGE Name: Name: 5815 WEDGEFIED DRIVE Address: Address: City-St-Zip: ZEPHYRHILLS, FL 33541 City-St-Zip: Title: () Delete Title: () Change () Addition Name: GEORGE, JESSY Name: 5815 WEDGEFIELD DRIVE Address: Address: City-St-Zip: City-St-Zip: ZEPHYRHILLS, FL 33541

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: GEORGE KURIAKOSE D 02/09/2007