

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000053359

Entity Name: DCD GROUP, INC.

FILED
Jun 25, 2006
Secretary of State

Current Principal Place of Business:

934 BLUEWOOD TERRACE
WESTON, FL 33327

New Principal Place of Business:

Current Mailing Address:

934 BLUEWOOD TERRACE
WESTON, FL 33327

New Mailing Address:

7900-D STEVENS MILL ROAD
#239
MATTHEWS, NC 28104

FEI Number: 75-3150653

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CACACE, DARREN M
805 GARNET CIRCLE
WESTON, FL 33326 US

Name and Address of New Registered Agent:

CACACE, DARREN M
7900-D STEVENS MILL ROAD #239
MATTHEWS, FL 28104 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: DARREN CACACE

06/25/2006

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: D () Delete
Name: CACACE, DARREN M
Address: 805 GARNET CIRCLE
City-St-Zip: WESTON, FL 33326

Title: D () Delete
Name: CACACE, CRISTIANE C
Address: 805 GARNET CIRCLE
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CACACE, DARREN M
Address: 7900 D STEVENS MILL ROAD, #239
City-St-Zip: MATTHEWS, NC 28104

Title: D (X) Change () Addition
Name: CACACE, CRISTIANE C
Address: 7900 D STEVENS MILL ROAD, #239
City-St-Zip: MATTHEWS, NC 28104

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: DARREN CACACE

D

06/25/2006

Electronic Signature of Signing Officer or Director

Date