2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006
Secretary of State

DOCUMENT# P04000060949

Entity Name: THE ALMONTE GROUP, INC.

Current Principal Place of Business:

2393 SOUTH CONGRESS AVENUE
WEST PALM BEACH, FL 33406

New Principal Place of Business:

Current Mailing Address:

1515 UNIVERSITY DR SUITE 204B
POMPANO BEACH, FL 330716096

New Mailing Address:

2393 SOUTH CONGRESS AVE
SUITE 200
WEST PALM BEACH, FL 33406

FEI Number: 05-4042676 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GLINN SOMERA AND SILVA, LLC
2255 GLADES ROAD
ONE BOCA PLACE - SUITE 335W
BOCA RATON, FL 33431 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ALMONTE, WILLIAM A SR.
Address: 140 CROSSING DR, APT 104
City-St-Zip: CUMBERING, RI 02864

Title: VP ( ) Delete
Name: ALMONTE, WILLIAM JR.
Address: 1515 UNIVERSITY DR 204 B
City-St-Zip: CORAL SPRINGS, FL 330716096

Title: TR ( ) Delete
Name: ALMONTE, GERALDINE
Address: 140 CROSSING DR, APT 104
City-St-Zip: CUMBERING, RI 02864

Title: S ( ) Delete
Name: LA MORA, JENNIFER
Address: 19 WINDSONG ROAD
City-St-Zip: CUMBERLAND, RI 02864

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ALMONTE, WILLIAM A SR.
Address: 140 CROSSING DR, APT 104
City-St-Zip: CUMBERLAND, RI 02864

Title: VP (X) Change ( ) Addition
Name: ALMONTE, WILLIAM JR.
Address: 2393 SOUTH CONGRESS AVE
City-St-Zip: WEST PALM BEACH, FL 33406

Title: TR (X) Change ( ) Addition
Name: ALMONTE, GERALDINE
Address: 140 CROSSING DR, APT 104
City-St-Zip: CUMBERLAND, RI 02864

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 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: WILLIAM ALMONTE VP 04/10/2006

Electronic Signature of Signing Officer or Director — Date