2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000087153

Entity Name: S.A. INTERNATIONAL GROUP, INC.

FILED Apr 21, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3901 S OCEAN DR 7614 NW 6 TH AVENUE SUITE 9R SUITE

HOLLYWOOD, FL 33019 BOCA RATON, FL 33487

Current Mailing Address: New Mailing Address:

 3901 S OCEAN DR
 16900 NORTH BAY ROAD

 SUITE 9R
 SUITE 1017

 HOLLYWOOD, FL 33019
 SUNNY ISLES, FL 33160

FEI Number: 20-1213929 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:

PINTO, SILVANO ALIRIO
3901 S OCEAN DR
SUITE 9R
HOLLYWOOD, FL 33019 US
PINTO, SILVANO ALIRIO
16900 NORTH BAY ROAD
SUITE 1017
SUNNY ISLES, FL 33160 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: SILVANO A. PINTO 04/21/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition PINTO, SILVANO ALIRIO Name: Name: PINTO, SILVANO ALIRIO 3901 S OCEAN DR SUITE 9R 16900 NORTH BAY ROAD Address: Address: City-St-Zip: HOLLYWOOD, FL 33019 City-St-Zip: SUNNY ISLES, FL 33160

Title: SD () Delete Title: SD (X) Change () Addition

Name: PINTO, JULIAN Name: PINTO, JULIAN

Address: 3901 S OCEAN DR SUITE 9R Address: 16900 NORTH BAY ROAD
City-St-Zip: HOLLYWOOD, FL 33019 City-St-Zip: SUNNY ISLES, FL 33160

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: SILVANO A. PINTO PTD 04/21/2006