

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000094897

Entity Name: SUNPRO GROUP, INC.

FILED
May 15, 2007
Secretary of State

Current Principal Place of Business:

6203 JOHNS RD., STE. 3
TAMPA, FL 33634

New Principal Place of Business:

501 S FALKENBURG RD
STE C11
TAMPA, FL 33619

Current Mailing Address:

6203 JOHNS RD., STE. 3
TAMPA, FL 33634

New Mailing Address:

2314 S CLEWIS CT
205
TAMPA, FL 33629

FEI Number: 45-0539137

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DITANNA, KEVIN A ESQ.
1200 W. PLATT ST., STE. 100
TAMPA, FL 33606 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

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: PD () Delete
Name: LAREW, WILLIAM
Address: 6203 JOHNS RD., STE. 3
City-St-Zip: TAMPA, FL 33634

Title: S (X) Delete
Name: HUA, AN
Address: 6203 JOHNS RD., STE. 3
City-St-Zip: TAMPA, FL 33634

Title: T (X) Delete
Name: NUI, JOSEPH
Address: 6203 JOHNS RD., STE. 3
City-St-Zip: TAMPA, FL 33634

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LAREW, WILLIAM
Address: 2315 S CLEWIS CT #205
City-St-Zip: TAMPA, FL 33629

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 J LAREW

PD

05/15/2007

Electronic Signature of Signing Officer or Director

Date