


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 13, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P04000157540</b> 1. Entity Name PENTAD GROUP, INC.	
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Principal Place of Business 7234 FRANCISCO BEND DRIVE DELRAY BEACH, FL 33446-5612	Mailing Address 7234 FRANCISCO BEND DRIVE DELRAY BEACH, FL 33446-5612
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**DO NOT WRITE IN THIS SPACE**



01092006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2040738	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  PESSES, MARVIN 7234 FRANCISCO BEND DRIVE DELRAY BEACH, FL 33446-5612	<b>DO NOT WRITE IN THIS SPACE</b>
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	1100000386297 01/18/06-80052-025 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PESSES, ELAINE 7234 FRANCISCO BEND DRIVE DELRAY BEACH, FL 334465612
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PESSES, MARVIN 7234 FRANCISCO BEND DRIVE DELRAY BEACH, FL 334465612
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** MARVIN PESSES **MARVIN PESSES** 1/10/06 (561) 495-2332  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #