## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000027892

Entity Name: CSN INTERNATIONAL GROUP INC

Apr 21, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1100 CASTLEWOOD TERR 102 CASSELBERRY, FL 32707 **New Mailing Address: Current Mailing Address:** 1100 CASTLEWOOD TERR 102 CASSELBERRY, FL 32707 FEI Number: 20-2392285 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JANSEN, JUAN C 1100 CASTLEWOOD TERR CASSELBERRY, FL 32707 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (X).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition SANSLTA, AROCHA O SANOJA, OSCAR P Name: Name: 1100 CASTLEWOOD TERR APT 100 1100 CASTLEWOOD TERR SUITE 102 Address: Address:

CASSELBERRY, FL 32707 City-St-Zip: CASSELBERRY, FL 32707

City-St-Zip:

Title: Title: (X) Change ( ) Addition () Delete Name: JANSEN, JUAN CARLOS Name: JANSEN, JUAN CARLOS VT

1100 CASTLE WOODS TERRANCE APT 102 1100 CASTLEWOOD TERR SUITE 102 Address: Address:

CASSELBERRY, FL 32707 CASSELBERRY, FL 32707 City-St-Zip: City-St-Zip:

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

DEL MONTE, IRENE G N ALTAGRACIA, REYES D Name: Name: 879 NONE STONE RUN 240 THERESA DR Address: Address: City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: KISSSIMMEE, FL 34743

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: JUAN CARLOS JANSEN VT 04/21/2007