2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000032561

Entity Name: D & L GROUP, INC.

FILED Apr 10, 2009 Secretary of State

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

319 S.E. 1ST AVENUE 13899 BISCAYNE BLVD

HALLANDALE BEACH, FL 33009 US 108

N MIAMI BEACH, FL 33181 US

Current Mailing Address: New Mailing Address:

319 S.E. 1ST AVENUE 13899 BISCAYNE BLVD

HALLANDALE BEACH, FL 33009 US 108

N MIAMI BEACH, FL 33181 US

FEI Number: 36-4569993 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:

COHEN, LAWRENCE J
319 S.E. 1ST AVENUE
COHEN, LAWRENCE J
13899 BISCAYNE BLVD

HALLANDALE BEACH, FL 33009 US 108

N MIAMI BEACH, FL 33181 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: 04/10/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,S () Delete Title: P,S (X) Change () Addition

Name: COHEN, LAWRENCE J Name: COHEN, LAWRENCE J

Address: 319 S.E. 1ST AVENUE Address: 13899 BISCAYNE BLVD, SUITE 108
City-St-Zip: HALLANDALE BEACH, FL 33009 US City-St-Zip: N MIAMI BEACH, FL 33181 US

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

Name: ROSS, DAVID A Name: ROSS, DAVID A

Address: 319 S.E. 1ST AVENUE Address: 13899 BISCAYNE BLVD, SUITE 108
City-St-Zip: HALLANDALE BEACH, FL 33009 US City-St-Zip: N MIAMI BEACH, FL 33181 US

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: LAWRENCE J COHEN P 04/10/2009