2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000075056

Entity Name: LIBOTO GROUP, INC.

Name:

Address:

City-St-Zip:

348 PILGRIM RD.

WEST PALM BEACH, FL 33405 US

FILED Mar 21, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 348 PILGRIM ROAD WEST PALM BEACH, FL 33405 US **Current Mailing Address: New Mailing Address:** 348 PILGRIM ROAD PO BOX 58 WEST PALM BEACH, FL 33405 US PALM CITY, FL 34991 US FEI Number: 34-2047945 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: ROBERT, WELSH ROBERT, WELSH, JR 2851 S.W. BRIGHTON WAY 2851 S.W. BRIGHTON WAY PALM CITY, FL 34990 PALM CITY, FL 34990 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: ROBERT WELSH, JR 03/21/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition MAGNANI, LINDA A Name: Name: 348 PILGRIM RD. Address: Address: City-St-Zip: WEST PALM BEACH, FL 33405 US City-St-Zip: Title: Title: () Delete () Change () Addition Name: MAGNANI, LINDA A Name: 348 PILGRIM RD. Address: Address: WEST PALM BEACH, FL 33405 US City-St-Zip: City-St-Zip: () Delete Title: Title: VΡ () Change () Addition MAGNANI, THOMAS Name: Name: 348 PILGRIM RD. Address: Address: City-St-Zip: WEST PALM BEACH, FL 33405 US City-St-Zip: Title: () Delete Title: () Change () Addition MAGNANI, THOMAS

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.

Name:

Address:

City-St-Zip:

Ρ SIGNATURE: LINDA A MAGNANI 03/21/2006