2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000032681

Entity Name: DOUBLE GROUP, INC.

City-St-Zip:

HOLLYWOOD, FL 33021

FILED Jan 07, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4300 SHERIDAN ST AP 234 HOLLYWOOD, FL 33021 US **New Mailing Address: Current Mailing Address:** 4300 SHERIDAN ST AP 234 HOLLYWOOD, FL 33021 US FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GOMEZ, CARLOS GOMEZ, CARLOS M 4300 SHERIDAN ST 4300 SHERIDAN ST AP 234 AP 234 HOLLYWOOD, FL 33021 US HOLLYWOOD, FL 33021 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: CARLOS M. GOMEZ 01/07/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition Name: GOMEZ, CARLOS Name: GOMEZ, CARLOS M 4300 SHERIDAN ST AP 234 4300 SHERIDAN ST AP 234 Address: Address: City-St-Zip: HOLLYWOOD, FL 33021 US City-St-Zip: HOLLYWOOD, FL 33021 US Title: Title: () Delete () Change () Addition Name: GOMEZ, CARLOS Name: 4300 SHERIDAN ST AP 234 Address: Address: HOLLYWOOD, FL 33021 US City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition GOMEZ, ANDRES Name: Name: 2611 SW 59 MANOR HOUSE 1 Address: Address: FT LAUDERDALE, FL 33312 US City-St-Zip: City-St-Zip: Title: VΡ () Delete Title: () Change () Addition DAVID LESLIE FREEMAN, Name: Name: Address: 4300 SHERIDAN ST APT 234 Address:

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.

City-St-Zip:

SIGNATURE: CARLOS M. GOMEZ D 01/07/2007