

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000055334

Entity Name: EXXON GROUP, INC.

**FILED**  
**Jan 12, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

3850 GALT OCEAN DRIVE  
211  
FORT LAUDERDALE, FL 33308

## **New Principal Place of Business:**

7605 NW 41 STREET  
CORAL SPRINGS, FL 33065

## **Current Mailing Address:**

3850 GALT OCEAN DRIVE  
211  
FORT LAUDERDALE, FL 33308

## **New Mailing Address:**

7605 NW 41 STREET  
CORAL SPRINGS, FL 33065

FEI Number: 74-3174469

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

ALMQVIST, PER  
3850 GALT OCEAN DRIVE  
211  
FORT LAUDERDALE, FL 33308 US

## **Name and Address of New Registered Agent:**

ALMQVIST, PER  
7605 NW 41 STREET  
CORAL SPRINGS, FL 33065 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:

01/12/2012

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: D  
Name: ALMQVIST, PER  
Address: 7605 NW 41 STREET  
City-St-Zip: CORAL SPRINGS, FL 33065

I hereby 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 all other like empowered.

SIGNATURE: PER ALMQUIST

D

01/12/2012

Electronic Signature of Signing Officer or Director

Date