2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2009
Secretary of State

DOCUMENT# P06000088632

Entity Name: ANSOR GROUP, INC.

Current Principal Place of Business:

9100 S DADELAND BLVD STE 1607
MIAMI, FL 33156

New Principal Place of Business:

2330 PONCE DE LEON BLVD
SUITE 201
CORAL GABLES, FL 33134

Current Mailing Address:

9100 S DADELAND BLVD STE 1607
MIAMI, FL 33156

New Mailing Address:

2330 PONCE DE LEON BLVD
SUITE 201
CORAL GABLES, FL 33134

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ACLAW REGISTERED AGENTS, LLC
9100 S DADELAND BLVD
STE 1000
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

ACG REGISTERED AGENTS, LLC
2330 PONCE DE LEON BLVD
STE 201
CORAL GABLES, FL 33134 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: BENJAMIN R. ALVAREZ 03/02/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: THOMS, ZACHARY
Address: 9100 S DADELAND BLVD STE 1000
City-St-Zip: MIAMI, FL 33156

Title: VP (X) Delete
Name: BOLIVAR, REBECCA
Address: 9100 S DADELAND BLVD STE 1000
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: THORNE, ZACHARY
Address: 2330 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33134

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: ZACHARY THORNE P 03/02/2009
Electronic Signature of Signing Officer or Director Date