## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000139310

Entity Name: IPRO ONE GROUP, INC.

FILED Jan 11, 2008 Secretary of State

Current Principal Place of Business:New Principal Place of Business:2610 SANDY CAY17781 VIA BELLA ACQUA CT., #1003<br/>MIROMAR LAKES, FL 33913 US

Current Mailing Address: New Mailing Address:

2610 SANDY CAY
WEST PALM BEACH, FL 33411 US
17781 VIA BELLA ACQUA CT., #1003
MIROMAR LAKES, FL 33913 US

FEI Number: 20-5861204 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NOLL, GREG
2610 SANDY CAY
WEST PALM BEACH, FL 33411 US
NOLL, GREG
17781 VIA BELLA ACQUA CT., #1003
MIROMAR LAKES, FL 33913 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: 01/11/2008

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 NOLL, GREG NOLL, GREG Name: Name: 2610 SANDY CAY 17781 VIA BELLA ACQUA CT., #1003 Address: Address: City-St-Zip: WEST PALM BEACH, FL 33411 US City-St-Zip: MIROMAR LAKES, FL 33913 US Title: () Delete Title: ( ) Change (X) Addition

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 P ( ) Change (X) Addition

 Name:
 Name:
 WEST, PAUL

 Address:
 1,7794, VIA BELLA ACQUIA CT, #100;

Address: Address: 17781 VIA BELLA ACQUA CT., #1001
City-St-Zip: City-St-Zip: MIROMAR LAKES, FL 33913 US

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

Name: Name: WOOD, ANTHONY A

 Name:
 Name:
 WOOD, ANTHONY A

 Address:
 Address:
 17781 VIA BELLA ACQUA CT., #1001

 City-St-Zip:
 City-St-Zip:
 MIROMAR LAKES, FL 33913 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: GREG NOLL VP 01/11/2008