2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000008313

Entity Name: PRO ANGLER GROUP, INC.

FILED Aug 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6035 US HWY 19

NEW PORT RICHEY, FL 34652 US

Current Mailing Address: New Mailing Address:

11619 EASTERN STAR CT. 7609 KAREN DR

NEW PORT RICHEY, FL 34654 US PORT RICHEY, FL 34668 US

FEI Number: 20-8304704 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MASSARO, JR, FRANK L HART, AMANDA L 11619 EASTERN STAR CT. 7609 KAREN DRIVE

NEW PORT RICHEY, FL 34654 US PORT RICHEY, FL 34668 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: AMANADA L HART 08/29/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST () Delete Title: P (X) Change () Addition

Name:MASSARO, JR, FRANK LName:PRICE, JR, ARTHUR HAddress:11619 EASTERN STAR CT.Address:5742 TROUBLE CREEK RDCity-St-Zip:NEW PORT RICHEY, FL 34654 USCity-St-Zip:NEW PORT RICHEY, FL 34652 US

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

Name:PRICE, JR, ARTHUR HName:HART, BRIAN DAddress:5742 TROUBLE CREEK RDAddress:7609 KAREN DR

City-St-Zip: NEW PORT RICHEY, FL 34652 US City-St-Zip: PORT RICHEY, FL 34668 US

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

 Name:
 Name:
 HART, AMANADA L

 Address:
 Address:
 7609 KAREN DR

City-St-Zip: City-St-Zip: PORT RICHEY, FL 34668 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: AMANADA L HART S 08/29/2008