2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000025849

Entity Name: ORVITS GROUP, INCORPORATED

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7648 NW 5TH STREET **BUILDING 8-2E** PLANTATION, FL 33324 **Current Mailing Address: New Mailing Address:** 7648 NW 5TH STREET **BUILDING 8-2E** PLANTATION, FL 33324 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CESPEDES, VILMA 7648 NW 5TH STREET PLANTATION, FL 33324 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition TUEROS, ELMIRO Name: Name: 7648 NW 5TH STREET, BLDG 8-2E Address: Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip: VSTD Title: Title: () Delete () Change () Addition Name: CESPEDES, VILMA Name: 7648 NW 5TH STREET, BLDG 8-2E Address: Address: PLANTATION, FL 33324 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition TUEROS, JUAN Name: Name: 7648 NW 5TH STREET, BLDG 8-2E Address: Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip: () Delete Title: Title: () Change () Addition TUEROS, JAVIER Name: Name: Address: 7648 NW 5TH STREET, BLDG 8-2E Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip: Title: Title: () Delete () Change () Addition TUEROS, CESAR Name: Name: 7648 NW 5TH STREET, BLDG 8-2E Address: Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip: Title: () Delete Title: () Change () Addition TUEROS, DANIEL Name: Name: 7648 NW 5TH STREET, BLDG 8-2E Address: Address: City-St-Zip: City-St-Zip: PLANTATION, FL 33324

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: ELMIRO TUEROS PD 04/29/2008