

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000059362

FILED  
Feb 19, 2008  
Secretary of State

Entity Name: STRATEGIC GROUP INVESTMENT, CORP.

**Current Principal Place of Business:**

9930 N.W. 21ST STREET  
DORAL, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

9930 N.W. 21ST STREET  
DORAL, FL 33172

**New Mailing Address:**

FEI Number: 26-0203936

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REYES, TOMAS  
9930 NW 21ST STREET  
DORAL, FL 33172 US

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

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:**

Title: P ( ) Delete  
Name: REYES, TOMAS  
Address: 9930 NW 21 STREET  
City-St-Zip: DORAL, FL 33172

Title: S ( ) Delete  
Name: MARTINEZ, DORYS  
Address: 7222 SPIKERUSH LANE  
City-St-Zip: WINTER GARDEN, FL 34787

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: TOMAS REYES

P

02/19/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date