


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 17, 2008 08:00 A
Secretary of State

DOCUMENT # P13013	
1. Entity Name THE CIRCUS GROUP CORPORATION	
	
Principal Place of Business 1900 BOOTHE CIRCLE, STE 104 LONGWOOD, FL 32750	Mailing Address 1900 BOOTHE CIRCLE, STE 104 LONGWOOD, FL 32750



02082008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2759636	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent LEVINE, WILLIAM 1900 BOOTHE CIRCLE, STE 104 LONGWOOD, FL 32750
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
(Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating))

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ALVAREZ, CARLOS 14800 SAN PEDRO, S-310 SAN ANTONIO, TX
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BOLZ, JAMES J 14800 SAN PEDRO STE 310 SAN ANTONIO, TX 78232
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LEVINE, WILLIAM 14800 SAN PEDRO, STE 310 SAN ANTONIO, TX 78232
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS CUNNINGHAM, RUSSELL 14800 SAN PEDRO, STE 310 SAN ANTONIO, TX 78232
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/29/08-80088-015 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Handwritten Signature]

4/10/08

210 590-9128