2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000005967

Entity Name: PORTFOLIO RESOURCES GROUP, INC

FILED Feb 28, 2009 Secretary of State

Littly Na	ile. FORTIC	LIO RESCORCES GROOF, IN	С.			
Current P	rincipal Place	e of Business:	New Prince	New Principal Place of Business:		
800 BRICKELL AVE SUITE 1401 MIAMI, FL 33131			800 BRICK SUITE 903 MIAMI, FL			
Current M	lailing Addre	ss:	New Maili	New Mailing Address:		
800 BRICK SUITE 140 MIAMI, FL)1		800 BRICK SUITE 903 MIAMI, FL			
FEI Number:	65-0370652	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
SUITE 280 MIAMI, FL The above	KELL AVENU) 33131 US		urpose of changing i	ts registered of	fice or registered agent, or both,	
SIGNATUR	RE:					
	Electro	nic Signature of Registered Age	ent		Date	
Election Car	npaign Financin	g Trust Fund Contribution ().				
OFFICERS	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	BRICENO, RAI	AVE SUITE 903	Title: Name: Address: City-St-Zip:	()(Change () Addition	
Title: Name: Address: City-St-Zip:	MARAVER, JO) Delete SE M .AVE SUITE 903	Title: Name: Address: City-St-Zip:	T (X) MARAVER, JOSI 800 BRICKELL A MIAMI, FL 3313	AVE SUITE 903	
Title: Name: Address: City-St-Zip:	CAMEJO, ANT) Delete DNIO AVE SUITE 903	Title: Name: Address: City-St-Zip:	S (X) CAMEJO, ANTOI 800 BRICKELL A MIAMI, FL 3313	AVE SUITE 903	
Title: Name: Address: City-St-Zip:	BREWER, CAR) Delete RMEN E. AVE SUITE 903	Title: Name: Address: City-St-Zip:	D (X) BREWER, CARM 800 BRICKELL A MIAMI, FL 3313	AVE SUITE 903	
Title: Name: Address: City-St-Zip:	D (OGMACIO SOS 800 BRICKELL MIAMI, FL 331	STE 903	Title: Name: Address: City-St-Zip:	D (X) IGNACIO SOSA, 800 BRICKELL S MIAMI, FL 3313	SUITE 903	

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: ANTONIO CAMEJO PRES 02/28/2009