

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000027915

FILED  
Apr 20, 2007  
Secretary of State

Entity Name: ULTRAPURE GROUP LIMITED, INC.

## Current Principal Place of Business:

1050 CORPORATE AVENUE  
UNIT 114  
NORTH PORT, FL 342899373 US

## New Principal Place of Business:

7143 BARGELLO ST  
ENGLEWOOD, FL 34224 US

## Current Mailing Address:

7143 BARGELLO ST.  
ENGLEWOOD, FL 34224

## New Mailing Address:

PO BOX 1263  
ENGLEWOOD, FL 34295

FEI Number: 65-0402866

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DICENTES, DOMINIC  
1050 CORPORATE AVENUE  
UNIT 114  
NORTH PORT, FL 342899373 US

## Name and Address of New Registered Agent:

DICENTES, DOMINIC  
7143 BARGELLO ST  
ENGLEWOOD, FL 34224 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:

04/20/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DICENTES, DOMINIC  
Address: 7143 BARGELLO ST  
City-St-Zip: ENGLEWOOD, FL 34224

Title: VP ( ) Delete  
Name: KOOPMAN, DENNIS E  
Address: 3657 JUNCTION ST  
City-St-Zip: NORTH PORT, FL 34287

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: KOOPMAN, DENNIS E  
Address: 3262 PENDANT CT  
City-St-Zip: NORTH PORT, FL 34287

I hereby certify that the information supplied with this filing does not qualify for the 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: DOMINIC DICENTES

P

04/20/2007

Electronic Signature of Signing Officer or Director

Date