

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P94000010140

FILED
Jan 16, 2002 8:00 AM
Secretary of State

Entity Name: A2 GROUP, INC.

Current Principal Place of Business:

5001 SW 74 TH CT
STE 103
MIAMI, FL 33155 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 43-2310
MIAMI, FL 33143

New Mailing Address:

FEI Number: 65-0469324

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RIBAS, ALBERTO G
5001 SW 74TH COURT
STE 103
MIAMI, FL 33155 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: RIBAS, ALBERTO G
Address: 5001 SW 74TH COURT SIDE 103
City-St-Zip: MIAMI, FL 33155

Title: DT () Delete
Name: REY, GERMAN JR.
Address: 5001 SW 74TH COURT STE 103
City-St-Zip: MIAMI, FL 33155

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 for the exemption stated in Section 119.07(3)(i), 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: ALBERTO G. RIBAS

DPS

01/16/2002

Electronic Signature of Signing Officer or Director

Date