

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90445 026 ***150.00

DOCUMENT # P94000014517



1. Entity Name
 THE SAYLOR GROUP, INC.

Principal Place of Business
 9918 HWY 66TH PL
 SUNRISE, FL 33351

Mailing Address
 5320 S.W. 88TH TERRACE
 COOPER CITY, FL 33328

50014901



2. Principal Place of Business
 4631 N.W. 31st AV

3. Mailing Address
 4631 N.W. 31st AV.

Suite, Apt. #, etc.
 # 258

Suite, Apt. #, etc.
 # 258

02092006 Chg-P CR2E034 (11/05)

City & State
 FT. LAUDERDALE, FL

City & State
 FT. LAUDERDALE, FL

4. FEI Number
 65-0469765

Applied For
 Not Applicable

Zip
 33309

Country
 US

Zip
 33309

Country
 US

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 SAYLOR, JAMES
 413 LAKEVIEW DR STE 102
 FORT LAUDERDALE, FL 33326

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City
 FL Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SAYLOR, JAMES 413 LAKEVIEW DR APT 102 FORT LAUDERDALE, FL 33326	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SAYLOR, JAMES 4631 N.W. 31st AV. # 258 FT. LAUDERDALE, FL. 33309
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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: *James Saylor* James SAYLOR Date: 2/24/06 561-281-7464 Daytime Phone #