


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90261 018 ***150.00

DOCUMENT # P94000062021	
1. Entity Name THE TIWI GROUP INC.	

Principal Place of Business 3309 COUCRED BRIDGE DR W DUNEDIN, FL 34698-9319 US	Mailing Address 3309 COUCRED BRIDGE DR W DUNEDIN, FL 34698-9319 US
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2. Principal Place of Business - No P.O. Box # 3309 COVERED BRIDGE DR. W.	3. Mailing Address 3309 COVERED BRIDGE DR. W.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State DUNEDIN, FL	City & State DUNEDIN
Zip 34698	Country USA
City & State DUNEDIN, FL	City & State DUNEDIN
Zip 34698	Country USA



04152007 Chg-P CR2E034 (12/06)

4. FEI Number 23-2778104	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 LONG, DOUG M 2141 BRADFORD ST CLEARWATER, FL 33760	7. Name and Address of New Registered Agent Name CURTIS LONG Street Address (P.O. Box Number is Not Acceptable) 3309 COVERED BRIDGE DR. W. City DUNEDIN FL 34698
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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 Curtis Long (Secretary)	DATE 4-15-07

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LONG, DOUG C 2141 BRADFORD ST CLEARWATER, FL 33760	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1382 RIBOLLA DR. PALM HARBOR, FL 34683
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LONG, CURTIS D 3309 COVERED BRIDGE DR W. DUNEDIN, FL 346989319	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3309 COVERED BRIDGE DR. W. DUNEDIN, FL 34698
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete D SAVASTANA, JOSEPH M 5027 BRIDGEPORT DR SAFETY HARBOR, FL 34695	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Curtis Long Curtis Long (secc)	DATE 4-15-07