

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 24, 2007 8:00 am
Secretary of State

01-24-2007 90043 038 ***150.00

DOCUMENT # P96000095449

1. Entity Name

THE 2022 GROUP, INC.



Principal Place of Business

14521 ROSEWOOD ROAD
MIAMI LAKES FL 33014

Mailing Address

14521 ROSEWOOD ROAD
MIAMI LAKES FL 33014



2. Principal Place of Business - No P.O. Box #

2022 N. Dixie Hwy

3. Mailing Address

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

Hollywood, FL

City & State

Hollywood, FL

4. FEI Number 65-0717563

Applied For

Not Applicable

Zip

33020

Country

Broward

Zip

33020

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HINTON, CHRISTINE
14521 ROSEWOOD ROAD
MIAMI LAKES FL 33014

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

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE: DPS
NAME: HINTON, CHRISTINE
STREET ADDRESS: 14521 ROSEWOOD ROAD
CITY, ST, ZIP: MIAMI LAKES FL ☐ Delete

TITLE: D
NAME: HINTON, WALTON
STREET ADDRESS: 14521 ROSEWOOD ROAD
CITY, ST, ZIP: MIAMI LAKES FL ☐ Delete

TITLE: DVP
NAME: HINTON, KENNETH
STREET ADDRESS: 14521 ROSEWOOD RD
CITY, ST, ZIP: MIAMI LAKES FL ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY, ST, ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY, ST, ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY, ST, ZIP: ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY, ST, ZIP: ☐ Change ☐ Addition

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CITY, ST, ZIP: ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Christine M. Hinton CHRISTINE M HINTON, Pres

1-18-2007

305-821-9513

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #