FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **P97000048784**1. Corporation Name

EASY EASY GROUP INC.

22

23

24

Zip

Principal Place of Business	Mailing Address		
10568 RIO HERMOSO DELRAY BEACH FL 33446	10568 RIO HERMOSO DELRAY BEACH FL 33446		
Principal Place of Business	2a. Mailing Address		
21	26 Suite Apt # atc		

27 City & State City & State Country Zip Country

29

9. Name and Address of Current Registered Agent

4. FEI Number 65-0757720 5. Certifcate of Status Desired

6. Election Campaign Financing Trust Fund Contribution

3. Date Incorporated or Qualifed

06/02/1997

8. This corporation owes the current year Intangible Personal Property Tax.

\$5.00 May Be Added to Fees

Applied For Not Applicable

⊠No

\$8.75 Additional

Fee Required

10. Name and Address of New Registered Agent

May 01, 1999 8:00 am Secretary of State

05-01-1999 90003 019 ***150.00

DO NOT WRITE IN THIS SPACE

PARIS, RAY 10568 RIO HERMOSO **DELRAY BEACH FL 33446**

81	Name		
82	Street Address (P.O. Box Number is Not Acceptable)		
83			
84	City	85	Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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-g							
SIGNATURE	Signature, typed or printed name of registered agent and title	a if applicable /NOTE:	Registered Agent signature /	required when reinstating) DATE			
12.	OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	PDTS	☐ DELETE	1.1 TITLE		Change	Addition	
NAME	PARIS, RAY		1.2 NAME				
STREET ADDRESS			1.3 STREET ADDRESS				
CTTY-ST-ZIP	DELRAY BCH FL 33446		1,4 CITY+ST-ZIP				
IIILE	VD	☐ DELETE	2.1 TITLE		Change	☐ Addition	
NAME	MORTEZAI, RASSOL		2.2 NAME				
STREET ADDRESS			2.3 STREET ADDRESS				
CITY-ST-ZIP	DELRAY BCH FL 33446		2. 4 CITY-ST-ZIP	, , , , , , , , , , , , , , , , , , , ,			
TITLE	D	☐ DELETE		D	Change	Addition	
NAME	SUMON, MIKE		3.2 NAME	SUMON, MIKE 7887 TALAVERA PLACE DELRAY BEACH, EL 33 WE			
STREET ADDRESS	44-44-514-44-44-44-44-44-44-44-44-44-44-44-44-4		3.3 STREET ADDRESS	7887 TALAVERA PLACE			
CITY-ST-ZIP	DELRAY BCH FL 33446		3.4. CITY-ST-ZIP	DELRAY BEACH, EL 33 446	,		
TITLE	DEBINI DOTTE SOTTO	☐ DELETE	4.1 TITLE		Change	Addition	
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP	• • •		4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE		Change	☐ Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS	<u> </u>			
C/TY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		DELETE	6.1 TITLE		Change	☐ Addition	
NAME			6.2 NAME				
OTREET ARRESS			6.3 STREET ADDRESS				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE