2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 07, 2004 8:00 am Secretary of State

DOCUMENT # P98000063000 1. Entity Name NETWORK CAPITAL GROUP, INC.					05-07-2004	90127 021 ***1	150.00	
Principal Plac		Mailing Address 1525 N PARK DR				2407318	û	
SUTIE 101 WESTON, FL	33326 US .	SUTIE 101 WESTON, FL 33326 US		.		1 6 b ille elles 11111 88(1) 88(3)		
2. Principal P	Place of Business WESTON ROAD	3. Mailing Address 2500 WBSTO)	U ROAM					
Suite, Apt.		Suite, Apt. #, etc.		01282004	Chg-P	CR2E034 (10/03)	
City & State WBSTON FL		City & State WBSTON FL		4. FEI Number 65-0853	183	<u> </u>	Applied For Not Applicable	
Zip 33-3-31	Country	Zip C	ountry JSA	5. Certificate of		\$8.75 Ac	ditional	
2225	6. Name and Address of Current i		J.J.,	7. Name and A	dress of New Re			
Name				- · · · · · · · · · · · · · · · · · · ·	SAS			
BRICENO, DOUGLAS 1525 N PARK DR STE 101				BRICE DOUG AS Street Address (P.O. Box Number is Not Acceptable)				
WESTON, FL 33326				····	'			
				2500 WESTON ROAD, STE 103				
				©WESTON FL 型3331				
the obligat	e named entity submits this statement for tions of registered agent. Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: Regi	stered Agent signature re	quired when reinstating)		DATE		
After _, M	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.0	9. Election Campaign F Trust Fund Contributi		\$5.00 May Be Added to Fees				
10.	. OFFICERS AND		11.	ADDITIONS/CI	HANGES TO OFFI	ICERS AND DIRECTO	RS IN 11	
TITLE	PSD POLICIAS	- 0000	TITLE			☐ Change	Addition	
NAME STREET ADDRESS	BRICENO, DOUGLAS 1525 N PARK DR SUITE 101		NAME STREET ADDRESS				ļ	
CITY-ST-ZIP	WESTON, FL 33326		CITY-ST-ZIP					
TITLE	VPD:	☐ Delete	TITLE	· · · · · · · · · · · · · · · · · · ·		🔀 Change	☐ Addition	
NAME	BUCCO, VALENTINO			JCCCO, VALE	HAITA			
STREET ADDRESS CITY-ST-ZIP	1525 N PARK DR WESTON, FL 33326	-	STREET ADDRESS CITY-ST-ZIP					
TITLE	VPD		TITLE			Change	Addition	
- NAME	-JORGE, REMMY	•	NAME	-			7.000,000	
STREET ADDRESS	1525 N PARK DR		STREET ADDRESS					
CITY-ST-ZIP	WESTON, FL 33326		CITY-ST-ZIP					
TITLE NAME			TITLE NAME			Change	☐ Addition	
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE		☐ Delete	TITLE			☐ Change	☐ Addition	

12. 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 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.

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

a) VALENT

Delete

ucco 1/2

(954)385,-272

☐ Addition

☐ Change