2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000005271

Entity Name: N & E GROUP, INC.

City-St-Zip:

TYBEE ISLAND, GA 31328

FILED Apr 14, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2992 SOUTH 8TH STREET FERNANDINA BEACH, FL 32034 **Current Mailing Address: New Mailing Address:** P.O. BOX 2497 P.O. BOX 2497 TYBEE ISLAND, GA 31327 TYBEE ISLAND, GA 31328 US FEI Number: 22-3629435 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NAVON, GIL 2992 SOUTH 8TH STREET FERNANDINA BEACH, FL 32034 US 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PD () Delete Title: (X) Change () Addition NAVON, GIL NAVON, GIL Name: Name: P.O. BOX 2497 P.O. BOX 2497 Address: Address: City-St-Zip: TYBEE ISLAND, GA 31328 City-St-Zip: TYBEE ISLAND, GA 31328 US Title: VD Title: () Delete () Change () Addition ESHEL, ARIK Name: Name: 70 RUGBY RD. Address: Address: ROSLYN HEIGHTS, NY City-St-Zip: City-St-Zip: Title: () Delete Title: SD () Change () Addition NAVON, ZIV Name: Name: P.O. BOX 2018 Address: Address: City-St-Zip: TYBEE ISLAND, GA 31328 City-St-Zip: Title: TD () Delete Title: () Change () Addition NAVON, RONEN Name: Name: Address: P.O. BOX 2812 Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: GIL NAVON PD 04/14/2008