## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

SIGNATURE:

## **FILED** Apr 09, 2007 08:00 A Secretary of State DOCUMENT # \$09588 1. Entity Namo SIEMENS GROUP, INC. Principal Place of Business Mailing Address 5801 N CONGRESS STE 205 5801 N CONGRESS STE 205 **BOCA RATON FL 33487** STE 202 E BOCA RATON FL 33487 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite Apt. #, etc. Suite, Apt. #, etc 1st MOORE CR2E034 (10/06) Applied For City & State City & Stato 4. FEI Number 65-0229239 Not Applicable Country Ζıp Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SIEMENS, RICHARD Stroet Address (P.O. Box Number is Not Acceptable) 5801 N CONGRESS **BOCA RATON FL 33487** City Zip Codo 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 hamo of registered agent and lifteir applicable (NOTE: Registered Agent arginature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10, Change ☐ Addition □ Delete THEF TITLE SIEMENS, RICHARD NAMI. NAM *U000000695683* 5801 N CONGRESS STREET ADDRESS STREET ADDRESS 04/17/07-88070-016 150.88 **BOCA RATON FL 33487** CHY-SI-7P CHY-ST-ZIP Change Addition Delete TILLE NAME STREET ADDRESS STHELF ADDRESS CHY-ST-ZIP CHY-ST-ZIE Change ■ Addition Delete THE TillE NAMI NAME SHIFT ADDRESS STHEET ADDRESS CITY-ST-ZIP C11Y - S1 - 71P Change Addition ☐ Deleie TILLE HILL NAMI. NAME STREET ADDRESS STREET ADDRESS CITY - ST - 7IP CHY-SI-7(P ☐ Delete ☐ Change Addition HILE TILLE NAMI' STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-7IP ☐ Delete ШП Change ■ Addition THE NAME. NAME STREEL ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP 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 supplied entail report is frue and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or truskle 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 addition, with all other like empowered.

RICHARD SIEMENS 4/5/07 56/-362-9265