2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 24, 2004 08:00 AM **DOCUMENT # S55230** 1. Entity Name Secretary of State MASTER GROUP INTERNATIONAL CORPORATION Principal Place of Business Mailing Address 10500 SW 74TH AVE P 0 BOX 565026 101 101 MIAMI, FL 33156 US MIAMI, FL 33256 us 01212004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0269468 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LOUMIET, JUAN P DO NOT WRITE 1221 BRICKELL AVE MIAMI, FL 33131 IN THIS SPACE 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 stansture required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS MIE NAME GONZALEZ, ENRIQUE CHANG STREET ADDRESS APT 68 PANAMA 9A CITY-ST-ZIP REPUBLIC, DE PANAMA, U00000012701 01/26/04-80020-021 150.00 TITLE BURBANK, EDUARDO L NAME STREET ADDRESS 10500 SW 74TH AVE CITY-ST-ZIP MIAMI, FL mis NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP MIT IN THIS SPACE MALE STREET ADDRESS CITY-ST-ZIP ШΈ NAME STREET AUDRESS CTTY-51-ZIP TITLE NAME

12. (hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 and dress, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

21-JAN-04,