

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000057363

**Entity Name:** THE CROSS STRATEGY GROUP, INC.

**Current Principal Place of Business:**

12291 NW 20 CT  
PLANTATION, FL 33323

**Current Mailing Address:**

12291 NW 20 CT  
PLANTATION, FL 33323

**FEI Number:** 65-0764534

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SCHAFER, BRIAN  
12291 NW 20TH COURT  
PLANTATION, FL 33323 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

**Officer/Director Detail :**

|                 |                                 |                 |                      |
|-----------------|---------------------------------|-----------------|----------------------|
| Title           | P                               | Title           | VP                   |
| Name            | SCHAFER, B                      | Name            | ROSS, F              |
| Address         | 12291 NW 20TH CT                | Address         | 186 BLUE MOON AVE    |
| City-State-Zip: | PLANTATION FL 33323             | City-State-Zip: | LAKE PLACID FL 33852 |
|                 |                                 |                 |                      |
| Title           | ST                              |                 |                      |
| Name            | DOWNES, SCOTT                   |                 |                      |
| Address         | 23181 FOUNTAIN VIEW DRIVE APT E |                 |                      |
| City-State-Zip: | BOCA RATON FL 33433             |                 |                      |

*I hereby 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 all other like empowered.*

**SIGNATURE:** BRIAN SCHAFER

**PRESIDENT**

**03/28/2019**

Electronic Signature of Signing Officer/Director Detail

Date