

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F18000000244

**FILED**  
**Feb 05, 2019**  
**Secretary of State**  
**6413404783CC**

**Entity Name:** OBJECTIVE GROUP INC

**Current Principal Place of Business:**

222 MERCHANDISE MART PLAZA  
SUITE 1225  
CHICAGO, IL 60654

**Current Mailing Address:**

299 ALHAMBRA CIR STE 403  
CORAL GABLES, FL 33134 US

**FEI Number:** 37-1844411

**Certificate of Status Desired:** Yes

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

CARIBROS LLC  
299 ALHAMBRA CIR- STE 403  
CORAL GABLES, FL 33134 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 D  
Name NASCIMENTO, JULIO CESAR  
Address 299 ALHAMBRA CIR. STE 403  
City-State-Zip: CORAL GABLES DE 19808

Title CEO,P,T  
Name VIANNA NETO, ADALBERTO F  
Address 299 ALHAMBRA CIR STE 403  
City-State-Zip: CORAL GABLES FL 33134

Title V  
Name DOS SANTOS, RAMON TRAMONTINI  
Address 222 MERCHANDISE  
MART PLAZA STE 1225  
City-State-Zip: CHICAGO IL 60654

Title D  
Name BARBOSA DE MIRANDA, JOAO PAULO  
Address 299 ALHAMBRA CIR- STE 403  
City-State-Zip: CORAL GABLES FL 33134

Title S  
Name KARAM, ALVARO  
Address 299 ALHAMBRA CIR- STE 403  
City-State-Zip: CORAL GABLES FL 33134

*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:** ALVARO KARAM

S

02/05/2019

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date