2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006909

Entity Name: E1R1B1 GROUP, INC.

FILED Apr 23, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 700 NW 175TH STREET MIAMI, FL 33169 **Current Mailing Address: New Mailing Address:** 700 NW 175TH STREET MIAMI, FL 33169 FEI Number: 20-5018254 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FAIRWEATHER, NEWTON 20240 NW 3RD AVE MIAMI, FL 33169 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete FAIRWEATHER, NEWTON Name: Name: Address: 20240 NW 3RD AVE Address: City-St-Zip: MIAMI, FL 33169 City-St-Zip: Title: () Delete Title: () Change () Addition HEPBURN, JR., I.W. Name: Name: Address: 2440 PINE TREE DR. Address: City-St-Zip: MIRAMAR, FL 33023 City-St-Zip: Title: () Delete Title: (X) Change () Addition WITHERSPOON, CORBY Name: WITHERSPOON, CORY Name: 4301 ADAMS ST. Address: Address: 4301 ADAMS ST. City-St-Zip: HOLLYWOOD, FL 33021 City-St-Zip: HOLLYWOOD, FL 33021 Title: () Delete Title: D (X) Change () Addition Name: FORD, SHARHONDA Name: SWAIN, JEFREY 4930 NW 182ND ST 850 NW 203 ST. Address: Address: City-St-Zip: MIAMI, FL 33054 City-St-Zip: MIAMI, FL 33169 Title: () Delete Title: (X) Change () Addition BEDROSS, YVONE MCNEALY, ELANA Name: Name: 1911 NW 194TH TERR 9001 S. LAKE Address: Address: City-St-Zip: MIAMI, FL 33056 City-St-Zip: MIRAMAR CIRCLE, FL 33025 Title: () Delete Title: () Change () Addition DIMITRIOU. ALICIA Name: Name: Address: 10435 SW 22ND ST. Address: MIAMI, FL 33165 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NEWTON FAIRWEATHER P 04/23/2007