

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000037137

FILED
Mar 17, 2006
Secretary of State

Entity Name: FUNDAMENTAL INVESTMENT ALLIANCE GROUP, INC.

Current Principal Place of Business:

320 WEST KENNEDY BOULEVARD
SUITE 600
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

320 WEST KENNEDY BOULEVARD
SUITE 600
TAMPA, FL 33606

New Mailing Address:

FEI Number: 02-0719269 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARDNER, MERRITT A
401 EAST JACKSON STREET, SUITE 2400
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CARNEVALE, JULIE C
Address: 18109 GERACI ROAD
City-St-Zip: LUTZ, FL 33548

Title: D () Delete
Name: CARNEVALE, CHARLES C
Address: 18109 GERACI ROAD
City-St-Zip: LUTZ, FL 33548

Title: D () Delete
Name: SALVATO, CARL M
Address: 305 S. HABANA UNIT A
City-St-Zip: TAMPA, FL 33609

Title: D () Delete
Name: LOUDIN, TIMOTHY W
Address: RT #2 BOX 68-L
City-St-Zip: BUCKHANNON, WV 26201

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JULIE CARNEVALE

PRES

03/17/2006

Electronic Signature of Signing Officer or Director

_____ Date