

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000070075

FILED
Apr 30, 2009
Secretary of State

Entity Name: MONEY DYNAMICS GROUP, INC.

Current Principal Place of Business:

160 N W 176TH STREET
SUITE 205
MIAMI, FL 33169

New Principal Place of Business:

Current Mailing Address:

160 N W 176TH STREET
SUITE 205
MIAMI, FL 33169

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, LARRYE A
160 N W 176TH STREET
SUITE 205
MIAMI, FL 33169 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: SMITH, LARRYE A
Address: 350 N W 158TH AVENUE
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D (X) Delete
Name: CLEARE, SAMUEL L
Address: 1041 N W 136TH STREET
City-St-Zip: MIAMI, FL 33168

Title: D (X) Delete
Name: DIXON, LEROSA
Address: 1222 GINSBERG DRIVE
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D (X) Delete
Name: MADISON, NORBERT
Address: 930 N W 199TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

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 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: LARRYE A. SMITH

D

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date