


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 15, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P41056**  
 1. Entity Name  
**THE MORGANTI GROUP, INC.**



Principal Place of Business 100 MILL PLAIN ROAD 4TH FLOOR DANBURY, CT 06811 US	Mailing Address 100 MILL PLAIN ROAD 4TH FLOOR DANBURY, CT 06811 US
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**DO NOT WRITE IN THIS SPACE**



01062004 No Chg-P CR2E034 (10/03)

4. FEI Number 06-1149260	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
 C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION, FL 33324

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and file # applicable (NOTE: Registered Agent signature required when re-registering)

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOP SAAD, IMAD 100 MILL PLAIN ROAD DANBURY, CT 06811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPS TAKLA, NABIL M 100 MILL PLAIN ROAD DANBURY, CT 06811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPFA ABDAWI, A.F. 100 MILL PLAIN RD DANBURY, CT
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP CATINO, THEODORE 100 MILL PLAIN ROAD DANBURY, CT 06811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP SIMONE, VINCE 100 MILL PLAIN ROAD DANBURY, CT 06811
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 01/16/04-80013-002 158.75

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**  **Nabil M. Takla Secretary** **1/15/2004** **203 743-2675**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #