


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 21, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90306 032 \*\*\*150.00

<b>DOCUMENT # 609900</b>				
1. Entity Name 4201 MANAGEMENT GROUP, INC.				
Principal Place of Business 2911 OCEAN DR. VERO BEACH, FL 32963		Mailing Address 2911 OCEAN DR. VERO BEACH, FL 32963		
2. Principal Place of Business <i>2345 14TH AV.</i>		3. Mailing Address <i>2345 14TH AV.</i>		
Suite, Apt., #, etc. <i>SUITE 5</i>		Suite, Apt., #, etc. <i>SUITE 5</i>		
City & State <i>VERO BEACH FL</i>		City & State <i>VERO BEACH FL</i>		
Zip <i>32960</i>	Country <i>USA</i>	Zip <i>32960</i>	Country <i>USA</i>	
6. Name and Address of Current Registered Agent  SPYTEK THERESA H 4201 6TH LANE SW VERO BEACH, FL 32968		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
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: <i>Theresa Spytex</i> DATE: <i>1/6/2006</i> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent Signature required when resigning)</small>				
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 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		
10. OFFICERS AND DIRECTORS				
TITLE	P	<input checked="" type="checkbox"/> Delete		
NAME	4201 MGMT. GROUP, INC.			
STREET ADDRESS	4201 6TH LANE SW			
CITY-ST-ZIP	VERO BEACH, FL 32968			
TITLE	<i>PRESIDENT</i>	<input type="checkbox"/> Delete		
NAME	<i>THERESA SPYTEK</i>			
STREET ADDRESS	<i>4201 6TH LN SW.</i>			
CITY-ST-ZIP	<i>VERO BEACH FL 32968</i>			
TITLE		<input type="checkbox"/> Delete		
NAME				
STREET ADDRESS				
CITY-ST-ZIP				
TITLE		<input type="checkbox"/> Delete		
NAME				
STREET ADDRESS				
CITY-ST-ZIP				
TITLE		<input type="checkbox"/> Delete		
NAME				
STREET ADDRESS				
CITY-ST-ZIP				
TITLE		<input type="checkbox"/> Delete		
NAME				
STREET ADDRESS				
CITY-ST-ZIP				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME				
STREET ADDRESS				
CITY-ST-ZIP				
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME				
STREET ADDRESS				
CITY-ST-ZIP				
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME				
STREET ADDRESS				
CITY-ST-ZIP				
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition	
NAME				
STREET ADDRESS				
CITY-ST-ZIP				
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Theresa Spytex</i>		DATE: <i>6/27/06</i> 772-569-6085		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				

*THERESA SPYTEK*