2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 27, 2006 08:00 AN Secretary of State **DOCUMENT #850466** 1. Entity Name BERNARD HODES GROUP INC. Mailing Address Principal Place of Business 220 E 42ND ST 220 E 42ND ST NEW YORK, NY 10017 NEW YORK, NY 10017 04212006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 13-3043148 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY DO NOT WRITE 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 IN THIS SPACE 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 title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS VCFO TITLE FORTUNATO, JOSEPH NAME STREET ADDRESS 220 E 42ND ST CITY-ST-ZIP NEW YORK, NY 10017 TITLE U00000537431 05/09/06-80019-001 150.00 NAME SKILLINGS, BRUCE 2100 GENG RD. STREET ADDRESS CTTY-ST-ZIP PALO ALTO, CA 94303 mis HARRISON, TOM NAME STREET ADDRESS 36 WHIPOWILL CROSSING DO NOT WRITE CITY-ST-ZIP ARMONK, NY 10504 IN THIS SPACE mre NAME SIEGEL, BARRY STREET ADDRESS 7676 HILLMONT AVE. CITY-ST-ZIP HOUSTON, TX 77040 TITLE PCFO NAME SCHWARTZ, ALAN V.

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:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

220 E 42ND ST

VPC

NEW YORK, NY 10017

NEW YORK, NY 10017

ZIERING, ARTHUR

220 E 42ND ST

anature and typed on reinted name of signing officer or director

4/24/06

(212) 499 9133

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Daytime Phone #