2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004908

City-St-Zip:

BEL AIR, MD 21014

Entity Name: INFINITY BUSINESS GROUP, INCORPORATED

FILED Feb 13, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 9612 SUNBEAM CENTER DR. JACKSONVILLE, FL 32257 **Current Mailing Address: New Mailing Address:** P.O. BOX 23579 JACKSONVILLE, FL 32241 FEI Number: 42-1587736 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: POWELL, JOHN 9612 SUNBEAM CENTER DR. JACKSONVILLE, FL 32257 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition STUNGILL, BRYON K STURGILL, BRYON K Name: Name: P.O. BOX 1106 P.O. BOX 1106 Address: Address: City-St-Zip: PIKEVILLE, KY 41502 City-St-Zip: PIKEVILLE, KY 41502 Title: VC Title: () Delete () Change () Addition Name: POTTER, MICHAEL Name: P.O. BOX 1106 Address: Address: PIKEVILLE, KY 41502 City-St-Zip: City-St-Zip: () Delete Title: Title: DS () Change () Addition HOEVEN, BILL VAN Name: Name: P.O. BOX 23579 Address: Address: City-St-Zip: JACKSONVILLE, FL 32241 City-St-Zip: Title: DT () Delete Title: () Change () Addition BLEVINS, JOHN Name: Name: Address: 22 W. PENNSYLVANIA Address:

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.

City-St-Zip:

SIGNATURE: JOHN POWELL DIR 02/13/2006