

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000007463

FILED
Apr 28, 2006
Secretary of State

Entity Name: THE EL-AD GROUP, LTD., A DELAWARE CORPORATION

Current Principal Place of Business:

575 MADISON AVENUE, 22ND FLOOR
NEW YORK, NY 10022

New Principal Place of Business:

Current Mailing Address:

575 MADISON AVENUE, 22ND FLOOR
NEW YORK, NY 10022

New Mailing Address:

FEI Number: 22-3183955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMERICAN INFORMATION SERVICES, INC.
ONE SOUTHEAST THIRD AVENUE, 28TH FLOOR
MIAMI, FL 33131 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: DP () Delete
Name: HACKMON, ORLY
Address: 575 MADISON AVENUE, 22ND FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: DS () Delete
Name: ARBIT, SHEARA
Address: 575 MADISON AVENUE, 22ND FLOOR
City-St-Zip: NEW YORK, NY 10022

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: ORLY HACKMON

D

04/28/2006

Electronic Signature of Signing Officer or Director

Date