2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Mar 05, 2007 08:00 AN **Secretary of State DOCUMENT # F06000006073** 1. Entity Name M.O.S. GROUP, INC. Mailing Address Principal Place of Business 337 MAIN ST. 337 MAIN ST. FARMINGOALE, NY 11735 FARMINGDALE, NY 11735 No Cha-P CR2E034 (11/05) 02202007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 11-3366626 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 ST. TALLAHASSEE, FL 32301 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. (NOTE Registered Agent signature required when reinstating) \$5.00 May Be U00000655414 FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. 03/13/07-80106-008 150.00 Added to Fees OFFICERS AND DIRECTORS 10. CP TITLE COOKE, KEVIN NAME STREET ADDRESS 337 MAIN ST. FARMINGDALE, NY 11735 CITY-ST-ZIP TITLE HAME STREET ADORESS CITY-ST-ZP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP 12. Thereby 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 does not director of the corporation or the receiver or trustee employers of the corporation or the receiver or trustee employers of the 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 appropriate, with all other like empowered.

OFFICER OR DIRECTOR

FILED