

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002494

Entity Name: ADVOGENT GROUP, INC.

FILED
Feb 27, 2009
Secretary of State

Current Principal Place of Business:

371 HOES LN STE 300
PISCATAWAY, NJ 08854

New Principal Place of Business:

Current Mailing Address:

360 N. CRESCENT DR SOUTH BLDG
BEVERLY HILLS, CA 90210

New Mailing Address:

FEI Number: 20-5623385

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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: P () Delete
Name: EHRHART, TOM
Address: 371 HOES LN STE 300
City-St-Zip: PISCATAWAY, NJ 08854

Title: CFO () Delete
Name: DESIMONE, BLAKE
Address: 371 HOES LN STE 300
City-St-Zip: PISCATAWAY, NJ 08854

Title: VSD () Delete
Name: KALAWSKI, EVA M
Address: 360 N. CRESCENT DR SOUTH BLDG
City-St-Zip: BEVERLY HILLS, CA 90210

Title: V () Delete
Name: SIGLER, MARY ANN
Address: 360 N. CRESCENT DR SOUTH BLDG
City-St-Zip: BEVERLY HILLS, CA 90210

Title: V () Delete
Name: ZOLLO, STEPHEN T
Address: 360 N CRESCENT DR SOUTH BLDG
City-St-Zip: BEVERLY HILLS, CA 90210

Title: AS () Delete
Name: WARD, SALLY A
Address: 360 N CRESCENT DR SOUTH BLDG
City-St-Zip: BEVERLY HILLS, CA 90210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: EHARDT, TOM
Address: 371 HOES LN STE 300
City-St-Zip: PISCATAWAY, NJ 08854

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: SALLY A. WARD

AS

02/27/2009

Electronic Signature of Signing Officer or Director

Date