

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006564

Entity Name: PMG MARKETING, INC.

FILED
Apr 12, 2005
Secretary of State

Current Principal Place of Business:

2500 WESTFIELD DR.
ELGIN, IL 30123

New Principal Place of Business:

Current Mailing Address:

C/O CUMBERLAND LICENSING CORP.
P.O. BOX 7543
CUMBERLAND, RI 02864

New Mailing Address:

FEI Number: 13-3535508 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH 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: V () Delete
Name: HOCK, ROBERT
Address: 515 MADISON AVE.
City-St-Zip: NEW YORK, NY 10022

Title: PD () Delete
Name: SCHERRMAN, MICHAEL
Address: 1600 MCCONNOR PARKWAY, 11TH FL
City-St-Zip: SCHAUMBURG, IL 60196

Title: V () Delete
Name: COGNETTI, LAURA
Address: 500 AUSTRALIAN AVE., S., STE. 850
City-St-Zip: WEST PALM BEACH, FL 33401

Title: V () Delete
Name: PFISTER, BRYAN
Address: 1600 MCCONNOR PARKWAY
City-St-Zip: SCHAUMBURG, IL 60196

Title: S () Delete
Name: JULIAN, FRANK
Address: 1600 MCCONNOR PARKWAY, 11TH FL
City-St-Zip: SCHAUMBURG, IL 60196

Title: C () Delete
Name: HARLIN, JAMES
Address: 1600 MCCONNOR PARKWAY, 11TH FL
City-St-Zip: SCHAUMBURG, IL 60196

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CFO (X) Change () Addition
Name: RIESTERER, JAMIE
Address: 2500 WESTFIELD DRIVE
City-St-Zip: ELGIN, IL 60123

Title: PD (X) Change () Addition
Name: SCHERRMAN, MICHAEL
Address: 2500 WESTFIELD DRIVE
City-St-Zip: ELGIN, IL 60123

Title: AVP (X) Change () Addition
Name: MILLER, PAUL K
Address: 2500 WESTFIELD DRIVE
City-St-Zip: ELGIN, IL 60123

Title: D (X) Change () Addition
Name: OLSON, KENNETH
Address: 2500 WESTFIELD DRIVE
City-St-Zip: ELGIN, IL 60123

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 Section 119.07(3)(i), 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: MICHAEL SCHERRMAN

PD

04/12/2005

Electronic Signature of Signing Officer or Director

_____ Date