

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000140

FILED
Jan 08, 2007
Secretary of State

Entity Name: PERSONAL BUSINESS MANAGEMENT GROUP, LTD., CO.

Current Principal Place of Business:

1911 SUMMER STREET
STAMFORD, CT 06905

New Principal Place of Business:

Current Mailing Address:

1911 SUMMER STREET
STAMFORD, CT 06905

New Mailing Address:

FEI Number: 06-1040368

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEITRICH, DAVID
RIVERVIEW CENTER STE 350
1111 THIRD AVENUE WEST
BRADENTON, FL 34205 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: PCSD () Delete
Name: FRIEDMAN, CARL
Address: 3630 FAIROAKS PLACE
City-St-Zip: LONGBOAT KEY, FL 34228

Title: VP () Delete
Name: FRIEDMAN, JAMES
Address: 1911 SUMMER STREET
City-St-Zip: STAMFORD, CT 06905

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PRES (X) Change () Addition
Name: FRIEDMAN, JAMES
Address: 1911 SUMMER STREET
City-St-Zip: STAMFORD, CT 06905

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: JAMES FRIEDMAN

PRE

01/08/2007

Electronic Signature of Signing Officer or Director

Date