


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Jan 11, 2006 08:00 AM
Secretary of State**

DOCUMENT # F99000002333 1. Entity Name COOPER COMMUNICATIONS GROUP, INC.	
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Principal Place of Business 1101 STEWART AVE SUITE 2E GARDEN CITY, NY 11530	Mailing Address 1101 STEWART AVE SUITE 2E GARDEN CITY, NY 11530
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01052006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 11-2745680	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

DO NOT WRITE 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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

1000000382615
01/12/06-80018-019 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P COOPER, IRWIN 1101 STEWART AVE STE 2E GARDEN CITY, NY 11530
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CANOVA, GREGORY P 1101 STEWART AVE STE 2E GARDEN CITY, NY 11530
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby 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 accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **GREGORY P. CANOVA** 01/05/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #