

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F99000005091

FILED
Nov 13, 2005
Secretary of State

Entity Name: MARKETING SERVICES GROUP, INC.

Current Principal Place of Business:

18945 MAISONS DR.
LUTZ, FL 33558

New Principal Place of Business:

18917 SAINT LAURENT DRIVE
LUTZ, FL 33558

Current Mailing Address:

18945 MAISONS DR.
LUTZ, FL 33558

New Mailing Address:

18917 SAINT LAURENT DRIVE
LUTZ, FL 33558

FEI Number: 34-1892833

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BUSH, PAMELA A
18945 MAISONS DR.
LUTZ, FL 33558 US

Name and Address of New Registered Agent:

BUSH, PAMELA A
18917 SAINT LAURENT DRIVE
LUTZ, FL 33558 US

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: PAMELA A BUSH

11/13/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BUSH, E. STEPHEN
Address: 18945 MAISONS DR.
City-St-Zip: LUTZ, FL 33558

Title: ST () Delete
Name: BUSH, PAMELA A
Address: 18945 MAISONS DR.
City-St-Zip: LUTZ, FL 33558

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BUSH, E. STEPHEN
Address: 18917 SAINT LAURENT DRIVE
City-St-Zip: LUTZ, FL 33558

Title: ST (X) Change () Addition
Name: BUSH, PAMELA A
Address: 18917 SAINT LAURENT DRIVE
City-St-Zip: LUTZ, FL 33558

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: PAMELA A BUSH

ST

11/13/2005

Electronic Signature of Signing Officer or Director

Date