2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K94575

Entity Name: FLORIDA MEDIATION GROUP INC.

FILED Jan 05, 2007 Secretary of State

Lineity Na	ille. I LONIDA	RIVEDIATION ORCOIT, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
44 W FLA MIAMI, FL	GLER ST #190 33130	00			
Current Mailing Address:			New Mailing Address:		
44 W FLAG MIAMI, FL	GLER ST #190 33130	00			
FEI Number	: 65-0124636	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
C/O FLOR	ON, ALLENE RIDA MEDIATIO GLER ST, 19T 331306806 L	H FLOOR			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (NICHOLSON, A 769 ALLENDAI KEY BISCAYN	E ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DUVAUCHELLI	R ST, 19TH FLOOR	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ALLENE NICHOLSON PD 01/05/2007