



**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 17, 2008 08:00 A
Secretary of State

DOCUMENT # K96719 1. Entity Name THE MUSKETEERS GROUP, LTD., INC.	
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Principal Place of Business 4517 PALM BEACH POINT BLVD. WELLINGTON, FL 33414-7410 US	Mailing Address C/O LYNN RENDINE, CPA 3544 GOMER ST. YORKTOWN HEIGHTS, NY 10598 US
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DO NOT WRITE IN THIS SPACE

	
01312008 No Chg-P CR2E034 (11/05)	
4. FEI Number 58-1866568	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 MOGULL, IVAN 4517 PALM BEACH POINT BLVD. WELLINGTON, FL 33414
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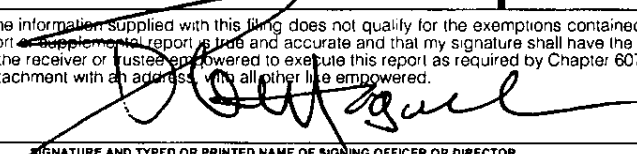
DO NOT WRITE IN THIS SPACE

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 _____ <small>Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DMPT MOGULL, IVAN 4517 PALM BEACH POINT BLVD. WELLINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TC MOGULL, IVAN 4517 PALM BEACH PT. BLVD. WELLINGTON, FL 33414
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<p>U000000859557 04/02/08-80026-012 150.00</p> <p>DO NOT WRITE IN THIS SPACE</p>

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 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: 	3/17/08
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date Daytime Phone #</small>