

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L10806

Entity Name: NMG, INC.

FILED
Apr 28, 2004
Secretary of State

Current Principal Place of Business:

6102 SAVOY CIRCLE
LUTZ, FL 33558

New Principal Place of Business:

Current Mailing Address:

C/O JOHN AGLIANO 201 NO FRANKLIN ST.
STE 2600
TAMPA, FL 33602

New Mailing Address:

FEI Number: 59-2963730

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHN J. AGLIANO ESQ.
201 NO. FRANKLIN STREET
STE 2600
TAMPA, FL 33602 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: S () Delete
Name: HOROWITZ, INGRID
Address: 3 WHIPPORWILL RD
City-St-Zip: ARMONK, NY 10504

Title: C () Delete
Name: FRIEDMAN, HAROLD
Address: 7 GRACIE SQUARE
City-St-Zip: NEW YORK, NY 10028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: INGRID HOROWITZ

S

04/28/2004

Electronic Signature of Signing Officer or Director

Date