2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # L14208

1. Entity Name

INTERNATIONAL HOLDING GROUP, INC.



FILED Feb 11, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

1101 NE 3RD STREET

HALLANDALE BEACH, FL 33009 US

1101 NE 3 ST

HALLANDALE, FL 33009 US



DO NOT WRITE IN THIS SPACE

02082008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0158697 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HOROSNY, MITZI A. 1101 NE 3RD STREET HALLANDALE BEACH, FL 33009

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent alignature required when reinstating) DATE					
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	U00000821782 02/19/08-80040-025 150.00
10.	OFFICERS AND DIRE	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVS HOROSNY, MITZI A. 1101 NE 3RD ST HALLANDALE BEACH, FL 33009				
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NAME	SZERETO, MITZI				
STREET ADDRESS	1101 NE 3RD ST				
CITY-ST-ZIP	HALLANDALE BEACH, FL 33009				
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CITY OF MD					

12. I hereby certify that the information supplied with this filling 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 cath; that I am an officer or director of the corporation or the receiver or function or the receiver or function or the receiver or function and the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or function and the same 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 lines are provided 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.

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAL OFFICER OR DIRECTOR

2.08.08 954-458-3/36