2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # M61561

1. Entity Name
A & V MARKETING GROUP, INC.

Principal Place of Business	Mailing Address
6601 LYONS ROAD SUITE C-6 COCONUT CREEK, FL 33073	9822 NW 18TH STREET CORAL SPRINGS, FL 33071

DO NOT WRITE IN THIS SPACE

03062008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
65-0016327	Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ALBERTS, MARVIN C
9822 NW 18TH SREET
CORAL SPRINGS, FL 33071

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 _____

Signature, typed or printed name of registered agent and title if applicable.   (NOTE. Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U000000871920
04/10/08-80018-002 158.75

10. OFFICERS AND DIRECTORS

TITLE	PSTD
NAME	ALBERTS, MARVIN
STREET ADDRESS	9822 NW 18TH ST
CITY-ST-ZIP	CORAL SPRINGS, FL 33071

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 or supplemental 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: _____ M. C. ALBERTS 3/24/08 954-427-6288
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #
PRESIDENT