2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000065685

Entity Name: E-MANAGEMENT GROUP, INC.

FILED Apr 28, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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3350 NW BOCA RATON BLVD

BOCA RATON, FL 33431

Current Mailing Address: New Mailing Address:

3350 NW BOCA RATON BLVD A6 BOCA RATON, FL 33431

FEI Number: 65-1022714 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FORMAN, RANDY PERRY, MARK

3350 NW BOCA RATON BLVD
A6
2400 EAST COMMERCIAL BLVD
201

BOCA RATON, FL 33431 US FORT LAUDERDALE, FL 33308 US

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: MARK PERRY 04/28/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: FORMAN, RANDY Name: HYMOWITZ, MITCHELL

Address: 3350 NW BOCA RATON BLVD #A-6 Address: 399 KNOLLWOOD ROAD, SUITE 300

City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: WHITE PLAINS, NY 10603

Title: ST () Delete Title: CEO (X) Change () Addition

Name: LOEWENSTERN, ELLIOT Name: LOEWENSTERN, ELLIOT

Address: 3350 NW BOCA RATON BLVD #A-6 Address: 3350 NW BOCA RATON BLVD #A-6

City-St-Zip: BOCA RATON, FL 33431 City-St-Zip: BOCA RATON, FL 33431

Title: P (X) Delete Title: () Change () Addition

 Name:
 HYMOWITZ, MITCHELL
 Name:

 Address:
 399 KNOLLWOOD RD
 Address:

 City-St-Zip:
 WHITE PLAINS, NY 10603
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MITCHELL HYMOWITZ PRES 04/28/2008