2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000071706

Entity Name: CHALLENGE CONSULTING GROUP, INC.

FILED Mar 01, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

220 71ST STREET4779 COLLINS AVENUESUITE 218SUITE 1801

MIAMI BEACH, FL 33141 MIAMI BEACH, FL 33140

Current Mailing Address: New Mailing Address:

 220 71ST STREET
 4779 COLLINS AVENUE

 SUITE 218
 SUITE 1801

 MIAMI BEACH, FL 33141
 MIAMI BEACH, FL 33140

FEI Number: 03-0469893 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:

DI BELLO, HAYDEE J.A.

220 71ST STREET

SUITE 218

MIAMI BEACH, FL 33141 US

VERONELLI, MARIA D

4779 COLLINS AVENUE

SUITE 1801

MIAMI BEACH, FL 33140 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: VERONELLI, MARIA D 03/01/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

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

Name: VERONELLI, MARIA D Name: VERONELLI, MARIA D Address: 220 71ST STREET- SUITE 218 Address: 4779 COLLINS AVENUE, SUITE 1801

Address: 220 71ST STREET- SUITE 218 Address: 4779 COLLINS AVENUE, SUITE 180 City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: MIAMI BEACH, FL 33140

Title: VD () Delete Title: VD (X) Change () Addition
Name: DI BELLO HAYDEF J A
Name: DI BELLO HAYDEF J A

Name:DI BELLO, HAYDEE J.A.Name:DI BELLO, HAYDEE J.A.Address:220 71ST STREET- SUITE 218Address:4779 COLLINS AVENUE, SUITE 1801

City-St-Zip: MIAMI BEACH, FL 33141 City-St-Zip: MIAMI BEACH, FL 33140

I hereby certify that the information supplied with this filing does not qualify for the 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: VERONELLI, MARIA D PD 03/01/2007