

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000074089

FILED
Apr 29, 2008
Secretary of State

Entity Name: MASTER HOLDINGS GROUP, INC.

Current Principal Place of Business:

6533 GRANDE ORCHID WAY
DELRAY BEACH, FL 33446

New Principal Place of Business:

Current Mailing Address:

6533 GRANDE ORCHID WAY
DELRAY BEACH, FL 33446

New Mailing Address:

FEI Number: 36-450703

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REDGRAVE & ROSENTHAL LLP
120 E PALMETTO PARK ROAD
450
BOCA RATON, FL 33432 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: DP () Delete
Name: POLLOCK, R D
Address: 6533 GRANDE ORCHID WAY
City-St-Zip: DELRAY BEACH, FL 33446

Title: D () Delete
Name: BUTLER, G M
Address: 3960 RIVERSIDE DRIVE
City-St-Zip: MACON, GA 31210

Title: S () Delete
Name: GOLDSTEIN, GARY A
Address: 1675 PALM BEACH LAKES BLVD 7 FLOOR
City-St-Zip: WEST PALM BEACH, FL 33401

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: DR () Change (X) Addition
Name: SCHINDLER, BRUCE
Address: 1215 MT PARAN RD
City-St-Zip: ATLANTA, GA 30327

Title: DR () Change (X) Addition
Name: DICRISTINA, FRANK
Address: 4505 MT GARMON RD
City-St-Zip: ATLANTA, GA 30327

Title: DIR () Change (X) Addition
Name: GASPARINI, ROBERT
Address: 164 KIRBY LANE
City-St-Zip: RYE, NY 10580

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: R D POLLOCK

PRES

04/29/2008

Electronic Signature of Signing Officer or Director

Date