2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 08, 2007
Secretary of State

DOCUMENT# P02000089541

Entity Name: MANAGEMENT ADVISORY GROUP INTERNATIONAL, INC.

Current Principal Place of Business:

<UNUSED>
TALLAHASSEE, FL 32308

New Principal Place of Business:

1350B N GADSDEN STREET
TALLAHASSEE, FL 32303

Current Mailing Address:

1350B N GADSDEN RD
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 88-0495510 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LONG, CAROLYN MS.
1350B N GADSDEN RD
TALLAHASSEE, FL 32303 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: PCEO ( ) Delete
Name: LONG, CAROLYN
Address: 1350B N GADSDEN RD
City-St-Zip: TALLAHASSEE, FL 32303

Title: CFO ( ) Delete
Name: LONG, DON
Address: 1350B N GADSDEN RD
City-St-Zip: TALLAHASSEE, FL 32303

Title: VP ( ) Delete
Name: LONG, DON
Address: 1350B N GADSDEN RD
City-St-Zip: TALLAHASSEE, FL 32303

Title: COO ( ) Delete
Name: LONG, DON
Address: 1350B N GADSDEN RD
City-St-Zip: TALLAHASSEE, FL 32303

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: ( ) Change ( ) Addition
Name:
Address:
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: CAROLYN LONG PCEO 06/08/2007

Electronic Signature of Signing Officer or Director — Date