

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000029805

FILED
Jan 08, 2008
Secretary of State

Entity Name: THE MOMPELLER GROUP, INC.

Current Principal Place of Business:

5412 WINCHESTER WOODS DRIVE
LAKE WORTH, FL 33463 US

New Principal Place of Business:

119 LAKE PINE CIR
A2
GREENACRES, FL 33463 US

Current Mailing Address:

5412 WINCHESTER WOODS DRIVE
LAKE WORTH, FL 33463 US

New Mailing Address:

119 LAKE PINE CIR
A2
GREENACRES, FL 33463 US

FEI Number: 41-2084668

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOMPELLER, LIVAN E
5412 WINCHESTER WOODS DRIVE
LAKE WORTH, FL 33463 US

Name and Address of New Registered Agent:

MOMPELLER, LIVAN E
119 LAKE PINE CIR
A2
GREENACRES, FL 33463 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: LIVAN MOMPELLER

01/08/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOMPELLER, LIVAN E
Address: 5412 WINCHESTER WOODS DRIVE
City-St-Zip: LAKE WORTH, FL 33463 US

Title: VP () Delete
Name: MOMPELLER, NOELY
Address: 5412 WINCHESTER WOODS DRIVE
City-St-Zip: LAKE WORTH, FL 33463 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MOMPELLER, LIVAN E
Address: 119 LAKE PINE CIR A2
City-St-Zip: GREENACRES, FL 33463 US

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: LIVAN MOMPELLER

PRES

01/08/2008

Electronic Signature of Signing Officer or Director

Date