

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000031012

FILED
May 02, 2008
Secretary of State

Entity Name: MDM FINANCIAL SERVICES GROUP, INC.

Current Principal Place of Business:

9784 NW 66 PL
PARKLAND, FL 33076

New Principal Place of Business:

3449 JUNIPER LANE
DAVIE, FL 33330

Current Mailing Address:

9784 NW 66 PL
PARKLAND, FL 33076

New Mailing Address:

3449 JUNIPER LANE
DAVIE, FL 33330

FEI Number: 36-4529869

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STOTTS, MICHAEL D
9784 NW 66 PL
PARKLAND, FL 33076 US

Name and Address of New Registered Agent:

STOTTS, MICHAEL D
3449 JUNIPER LANE
DAVIE, FL 33330 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: MICHAEL D STOTTS

05/02/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: STOTTS, MICHAEL D
Address: 9784 NW 66 PL
City-St-Zip: PARKLAND, FL 33076

Title: D () Delete
Name: STOTTS, MARLENE E
Address: 9784 NW 66 PL
City-St-Zip: PARKLAND, FL 33076

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STOTTS, MICHAEL D
Address: 3449 JUNIPER LANE
City-St-Zip: DAVIE, FL 33330

Title: D (X) Change () Addition
Name: STOTTS, MARLENE E
Address: 3449 JUNIPER LANE
City-St-Zip: DAVIE, FL 33330

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: MICHAEL D STOTTS

D

05/02/2008

Electronic Signature of Signing Officer or Director

Date