## 2006 FOR PROFIT CORPORATION

## FILED Jan 27, 2006 08:00 AN **ANNUAL REPORT DOCUMENT # P03000055156 Secretary of State** 1. Entity Name MMG GROUP, INC. Principal Place of Business Mailing Address 1290 WESTON RD 1290 WESTON RD SUITE 214 SUITE 214 WESTON, FL 33326 WESTON, FL 33326 01052006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0030276 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GUEVARA, MANUEL M DO NOT WRITE 1290 WESTON RD **SUITE 214** IN THIS SPACE WESTON, FL 33326 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and late if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PSD TITLE GUEVARA, MANUEL M NAME STREET ADDRESS 1290 WESTON RD, STE 214 CITY-ST-ZIP WESTON, FL 33326 U00000402599 82/03/06-80014-017 150.00 TITLE PRIETO, LEONEL NAME STREET ADDRESS 1290 WESTON RD, STE 214 WESTON, FL 33326 CITY-ST-ZIP TITLE KUBLER, GUILLERMO MARKE STREET ADDRESS 1290 WESTON RD, STE 214

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

TITLE MALJE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

WESTON, FL 33326

SIGNATURE.

DO NOT WRITE

IN THIS SPACE