2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000081968

Entity Name: LABOR LINE MARKETING GROUP INC.

FILED Jan 16, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

18970 NW 6 CT 20533 BISCAYNE BOULEVARD

MIAMI, FL 33169 SUITE # 1328

AVENTURA, FL 33180

Current Mailing Address: New Mailing Address:

18970 NW 6 CT 20533 BISCAYNE BOULEVARD

MIAMI, FL 33169 SUITE #1328

AVENTURA, FL 33180

FEI Number: 20-0141864 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DE LA VEGA, EDUARDO

18970 NW 6 CT

MIAMI, FL 33169 US

DE LA VEGA, EDUARDO

20533 BISCAYNE BOULEVARD

SUITE # 1328

NAMI, FL 33169 US SUITE # 1328 AVENTURA, FL 33180 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: E. DE LA VEGA 01/16/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

18970 NW 6 CT

MIAMI, FL 33169

Name: Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D () Delete Title: P/D (X) Change () Addition

Name: SINGLETON, ELIZABETH M Name: SINGLETON, ELIZABETH M
Address: 18970 NW 6 CT Address: 20533 BISCAYNE BOULEVARD SUITE# 1328

City-St-Zip: MIAMI, FL 33169 City-St-Zip: AVENTURA, FL 33180

Title: CEO () Delete Title: CEO (X) Change () Addition

Name: SINGLETON, LANCE S Name: SINGLETON, LANCE S

Address: 18970 NW 6 CT Address: 20533 BISCAYNE BOULEVARD SUITE # 1328

City-St-Zip: MIAMI, FL 33169 City-St-Zip: AVENTURA, FL 33180

Title: T/D () Delete Title: T/D (X) Change () Addition Name: DE LA VEGA, EDUARDO Name: DE LA VEGA, EDUARDO

Address: 18970 NW 6 CT Address: 20533 BISCAYNE BOULEVARD SUITE # 1328

City-St-Zip: MIAMI, FL 33169 City-St-Zip: AVENTURA, FL 33180

Title: S/D (X) Delete Title: () Change () Addition Name: LYONS, THEODORE Name:

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: E. DE LA VEGA T/D 01/16/2004