## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000108421

FILED Jan 25, 2005 Secretary of State

Entity Na	me: THE FIRM	M INVESTMENT GROUP, INC.					
Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business:			
P.O. BOX CAPE CO	152138 RAL, FL 3391	52138					
Current M	lailing Addres	ss:	New Maili	New Mailing Address:			
P.O. BOX CAPE CO	152138 RAL, FL 3391	52138					
FEI Number	: 20-1581452	FEI Number Applied For()	FEI Number Not App	icable ( )	Certificate of Status Desire	d (X)	
Name and	l Address of C	Current Registered Agent:	Name and	Address of	f New Registered Agent:		
	VICTOR . 14TH STREE RAL, FL 33993		16484 TON	CASTRO, VICTOR 16484 TONAWANDA DRIVE PUNTA GORDA, FL 33955 US			
	e named entity : e of Florida.	submits this statement for the p	urpose of changing i	ts registered	d office or registered agent,	or both,	
SIGNATU	RE:				01/25/2005		
	Electror	ic Signature of Registered Age	nt		Date		
Election Car	mpaign Financin	g Trust Fund Contribution ( ).					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD ( ) CASTRO, VICT 3315 N.W. 14T CAPE CORAL,	H STREET	Title: Name: Address: City-St-Zip:	CASTRO, VI 16484 TONA	(X) Change ( ) Addition CTOR E MR. WANDA DRIVE DA, FL 33955		
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	CASTRO, AE 3315 NW 14	( ) Change (X) Addition DELPHA M MS. TH STREET IL, FL 33993 US		
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	VAHLKAMP, 1510 SW 50	( ) Change (X) Addition AMY J MS. TH STREET, #304 L, FL 33914 US		
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	PUTMAN, JC 2244 SW 27	( ) Change (X) Addition DHN J MR. TH TERRACE L, FL 33914 US		
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	THAMES, JE 1336 OSPRE	( ) Change (X) Addition NNIFER MS. EY DRIVE DA, FL 33950 US		

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: ADELPHA M CASTRO VΡ 01/25/2005