2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000123418

Entity Name: RESPONSE PUBLISHING GROUP, INC.

FILED Apr 23, 2008 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business:	New Principal Place of Business
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216 CATALONIA AVE 75 VALENCIA AVENUE SUITE 110 SUITE 700

CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

216 CATALONIA AVE. 75 VALENCIA AVENUE

SUITE 110 SUITE 700

CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

FEI Number: 20-1566556 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SAYAGO, TONY
216 CATALONIA AVE
25 VALENCIA AVENUE

SUITE 110 SUITE 700 CORAL GABLES, FL 33134 US CORAL GABLES, FL 33134 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: 04/23/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

 Name:
 SAYAGO, TONY
 Name:
 SAYAGO, TONY

 Address:
 216 CATALONIA AVE, SUITE 110
 Address:
 75 VALENCIA AVENUE, SUITE 700

 City-St-Zip:
 CORAL GABLES, FL 33134
 City-St-Zip:
 CORAL GABLES, FL 33134

Title: V () Delete Title: VPD (X) Change () Addition

Name: SAYAGO, TINA Name: SAYAGO, TINA E

Address: 216 CATALONIA AVE., SUITE 110 Address: 75 VALENCIA AVENUE, SUITE 700 City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

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: TINA SAYAGO VPD 04/23/2008