

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000138854

Entity Name: LMP GROUP, INC.

FILED
Jul 08, 2008
Secretary of State

Current Principal Place of Business:

11890 SW 8TH STREET
PH 7
MIAMI, FL 33184

New Principal Place of Business:

Current Mailing Address:

11890 SW 8TH STREET
PH 7
MIAMI, FL 33184

New Mailing Address:

FEI Number: 20-1717726

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O & P TAX ACCOUNTING CORP.
11890 SW 8TH STREET
PENTHOUSE VII
MIAMI, FL 33184 US

Name and Address of New Registered Agent:

O&P TAX ACCOUNTING CORP.
11890 SW 8TH STREET
PENTHOUSE VII
MIAMI, FL 33184 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: OSCAR R. AGUILAR

07/08/2008

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: PCEO () Delete
Name: ALVARADO LEON, RAMON ELIAS
Address: 803 NW 170TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: VP () Delete
Name: ALVARADO LEON, RAMON ELIAS
Address: 803 NW 170TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: T () Delete
Name: ALVARADO LEON, RAMON ELIAS
Address: 803 NW 170TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: S () Delete
Name: ALVARADO LEON, RAMON ELIAS
Address: 803 NW 170TH TERRACE
City-St-Zip: PEMBROKE PINES, FL 33028 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RAMON E. ALVARADO LEON

P

07/08/2008

Electronic Signature of Signing Officer or Director

Date