

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000018908

FILED  
Apr 24, 2006  
Secretary of State

Entity Name: FONTE MANUFACTURING GROUP, INC.

## Current Principal Place of Business:

10262 BOCA SPRINGS DRIVE  
BOCA RATON, FL 33428 US

## New Principal Place of Business:

3301 NW 22ND TERRACE  
SUITE 500  
POMPANO BEACH, FL 33069 US

## Current Mailing Address:

10262 BOCA SPRINGS DRIVE  
BOCA RATON, FL 33428 US

## New Mailing Address:

3301 NW 22ND TERRACE  
SUITE 500  
POMPANO BEACH, FL 33069 US

FEI Number: 14-1922151

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FONTE, BETZAIDA  
10262 BOCA SPRINGS DRIVE  
BOCA RATON, FL 33428 US

## Name and Address of New Registered Agent:

FONTE, BETZAIDA  
3301 NW 22ND TERRACE  
SUITE 500  
POMPANO BEACH, FL 33069 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:

04/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FONTE, RICHARD  
Address: 10262 BOCA SPRINGS DRIVE  
City-St-Zip: BOCA RATON, FL 33428 US

Title: VP ( ) Delete  
Name: FONTE, BETZAIDA  
Address: 10262 BOCA SPRINGS DRIVE  
City-St-Zip: BOCA RATON, FL 33428 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FONTE, RICHARD  
Address: 3301 NW 22 TERRACE, SUITE 500  
City-St-Zip: POMPANO BEACH, FL 33069 US

Title: VP (X) Change ( ) Addition  
Name: FONTE, BETZAIDA  
Address: 3301 NW 22 TERRACE, SUITE 500  
City-St-Zip: POMPANO BEACH, FL 33069 US

Title: SEC ( ) Change (X) Addition  
Name: FONTE, BETZAIDA  
Address: 3301 NW 22 TERRACE, SUITE 500  
City-St-Zip: POMPANO BEACH, FL 33069

I hereby certify that the information supplied with this filing does not qualify for the 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: BETZAIDA FONTE

VP

04/24/2006

Electronic Signature of Signing Officer or Director

Date