## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000037819

Entity Name: EZ MANAGEMENT GROUP, INC.

FILED Jan 04, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3359 BELVEDENE RD., SUITE 0 3359 BELVEDERE ROAD W. PALM BCH, FL 33406 W. PALM BCH, FL 33406 **Current Mailing Address: New Mailing Address:** 3359 BELVEDENE RD., SUITE 0 3359 BELVEDERE ROAD W. PALM BCH, FL 33406 W. PALM BCH, FL 33406 FEI Number: 20-2498314 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: CARROLL, EDWARD CARROLL, EDWARD 7028 SEVILLA CT., #504 7028 SEVILLA CT. CAPE CANAVERAL, FL 32920 US #504 CAPE CANAVERAL, FL 32920 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: 01/04/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: PRFS ( ) Change (X) Addition CERVANTES, PLINIO Name: Name: 7572 VIA LURIA Address: Address: City-St-Zip: City-St-Zip: LAKE WORTH, FL 33467 Title: Title: VΡ ( ) Change (X) Addition () Delete Name: Name: ACOSTA, FREDY 1165 RIVERSIDE WALK CROSSING Address Address: SUGARHILL, GA 30518 City-St-Zip: City-St-Zip: Title: Title: ( ) Change (X) Addition () Delete FOLCHETTI, WILLIAM Name: Name: 1424 MAGLIANO DRIVE Address Address: City-St-Zip: City-St-Zip: BOYNTON BEACH, FL 33436 Title: () Delete Title: SEC ( ) Change (X) Addition CARROLL, EDWARD Name: Name: Address: Address: 7028 SEVILLA COURT B504 City-St-Zip: City-St-Zip: CAPE CANAVERAL, FL 32920

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: WILLIAM FOLCHETTI TR 01/04/2006