

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000056486

FILED
Apr 13, 2009
Secretary of State

Entity Name: CITY DEVELOPMENT GROUP INC

Current Principal Place of Business:

6067 HOLLYWOOD BLVD
205
HOLLYWOOD, FL 33024

New Principal Place of Business:

Current Mailing Address:

6067 HOLLYWOOD BLVD.
205
HOLLYWOOD, FL 33024

New Mailing Address:

FEI Number: 20-2726876

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONOLITH REAL ESTATE, INC
6067 HOLLYWOOD BLVD.
205
HOLLYWOOD, FL 33024 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHAKHOV, ILYA
Address: 16711 COLLINS AV #1903
City-St-Zip: SUNNY ISLES, FL 33160

Title: VP () Delete
Name: POLISKIY, IRINA
Address: 6067 HOLLYWOOD BLVD. #205
City-St-Zip: HOLLYWOOD, FL 33024

Title: T () Delete
Name: SHAKHOV, ZHANNA
Address: 16711 COLLINS AV #1903
City-St-Zip: SUNNY ISLES, FL 33160

Title: S () Delete
Name: POLISKIY, YAROSLAV
Address: 6067 HOLLYWOOD BLVD. #205
City-St-Zip: HOLLYWOOD, FL 33024

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: IRINA POLISKIY

VP

04/13/2009

Electronic Signature of Signing Officer or Director

Date