2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000058952

Entity Name: B.M.B. GROUP, INC.

FILED Feb 13, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2141 N UNIVERSITY DRIVE 5645 CORAL RIDGE DRIVE

#362 #281

CORAL SPRINGS, FL 33071 CORAL SPRINGS, FL 33076

Current Mailing Address: New Mailing Address:

2141 N UNIVERSITY DRIVE 5645 CORAL RIDGE DRIVE #362 #281

CORAL SPRINGS, FL 33071 CORAL SPRINGS, FL 33076

FEI Number: 20-4763365 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:

BRODER, MARC
2141 N UNIVERSITY DRIVE
MIEDNIK, BENJAMIN
5645 CORAL RIDGE DRIVE

#362 #281 CORAL SPRINGS, FL 33071 US CORAL SPRINGS, FL 33076 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: BENJAMIN MIEDNIK 02/13/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 BRODER, MARC
 Name:
 MIEDNIK, BENJAMIN

 Address:
 2141 N UNIVERSITY DRIVE #362
 Address:
 5645 CORAL RIDGE DRIVE #281

 City-St-Zip:
 CORAL SPRINGS, FL 33071
 City-St-Zip:
 CORAL SPRINGS, FL 33076

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

 Name:
 MIEDNIK, BENJAMIN
 Name:

 Address:
 2141 N UNIVERSITY DRIVE #362
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL 33071
 City-St-Zip:

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: BENJAMIN MIEDNIK PD 02/13/2007