

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000071716

FILED
Jan 18, 2008
Secretary of State

Entity Name: EXECUTIVE ALLIANCE GROUP INCORPORATED

Current Principal Place of Business:

5815 SE FEDERAL HWY
PMB 326
STUART, FL 34997 US

New Principal Place of Business:

5955 SE FEDERAL HWY
PMB 326
STUART, FL 34997 US

Current Mailing Address:

5815 SE FEDERAL HWY
PMB 326
STUART, FL 34997 US

New Mailing Address:

5955 SE FEDERAL HWY
PMB 326
STUART, FL 34997 US

FEI Number: 20-4924945

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GAZDOWICZ, EDNA
5815 SE FEDERAL HWY
PMB 326
STUART, FL 34997 US

Name and Address of New Registered Agent:

GAZDOWICZ, EDNA
5955 SE FEDERAL HWY
PMB 326
STUART, FL 34997 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:

01/18/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,T () Delete
Name: GAZDOWICZ, EDNA
Address: 5815 SE FEDERAL HWY PMB 326
City-St-Zip: STUART, FL 34997 US

Title: VP,S () Delete
Name: GAZDOWICZ, ROBERT W
Address: 5815 SE FEDERAL HWY PMB 326
City-St-Zip: STUART, FL 34997 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,T (X) Change () Addition
Name: GAZDOWICZ, EDNA
Address: 5955 SE FEDERAL HWY PMB 326
City-St-Zip: STUART, FL 34997 US

Title: VP,S (X) Change () Addition
Name: GAZDOWICZ, ROBERT W
Address: 5955 SE FEDERAL HWY PMB 326
City-St-Zip: STUART, FL 34997 US

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: ROBERT GAZDOWICZ

VP

01/18/2008

Electronic Signature of Signing Officer or Director

Date