

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000105801

FILED
Jan 03, 2007
Secretary of State

Entity Name: CONSOLIDATED MANAGEMENT GROUP USA, INC.

Current Principal Place of Business:

401 NORTH MICHIGAN
SUITE 1200
CHICAGO, IL 60611 US

New Principal Place of Business:

Current Mailing Address:

401 NORTH MICHIGAN
SUITE 1200
CHICAGO, IL 60611 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BADO-HOLZER, LIDIYA
4776 B GREENTREE DRIVE
BOYNTON BEACH, FL 33436 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: SEKULIC, SASA
Address: 401 NORTH MICHIGAN
City-St-Zip: CHICAGO, IL 60611 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MD (X) Change () Addition
Name: SEKULIC, SASA
Address: 401 NORTH MICHIGAN
City-St-Zip: CHICAGO, IL 60611 US

Title: MD () Change (X) Addition
Name: BADO, TATIANA
Address: 401 NORTH MICHIGAN
City-St-Zip: CHICAGO, IL 60611 US

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: SASA SEKULIC

MD

01/03/2007

Electronic Signature of Signing Officer or Director

_____ Date