

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000134569

FILED
Jan 29, 2007
Secretary of State

Entity Name: SECURITIES COMPLIANCE AND REGULATORY SERVICES GROUP, INC.

Current Principal Place of Business:

12350 FOXMOOR PEAK DR.
RIVERVIEW, FL 33569 US

New Principal Place of Business:

Current Mailing Address:

4 FIELDCREST WAY
HAZLET, NJ 07730 US

New Mailing Address:

FEI Number: 20-5758808

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEPE, JOHN R
12350 FOXMOOR PEAK DR.
RIVERVIEW, FL 33569 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: PEPE, JOHN R
Address: 12350 FOXMOOR PEAK DR.
City-St-Zip: RIVERVIEW, FL 33569 US

Title: SEC (X) Delete
Name: PEPE, JOHN R
Address: 12350 FOXMOOR PEAK DR.
City-St-Zip: RIVERVIEW, FL 33569 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: PEPE, JOHN R
Address: 12350 FOXMOOR PEAK DR.
City-St-Zip: RIVERVIEW, FL 33569 US

Title: () Change () Addition
Name:
Address:
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: JOHN R PEPE

PRES

01/29/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date