

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000067401

FILED
Apr 28, 2009
Secretary of State

Entity Name: CONTRACT MARKETING GROUP, INC.

Current Principal Place of Business:

8893 SILVERTHORN RD
LARGO, FL 33777

New Principal Place of Business:

Current Mailing Address:

8893 SILVERTHORN RD
LARGO, FL 33777

New Mailing Address:

FEI Number: 23-2489376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE LAW OFFICES OF NICKOLAS J. SPRADLIN, P
12000 N. DALE MABRY HWY
#110
TAMPA, FL 33618 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: DP () Delete
Name: LEIBOVITZ, ARNOLD
Address: 8893 SILVERTHORN RD
City-St-Zip: LARGO, FL 33777

Title: DVT () Delete
Name: LEIBOVITZ, JEAN
Address: 8893 SILVERTHORN RD
City-St-Zip: LARGO, FL 33777

Title: DVS () Delete
Name: LEIBOVITZ, KARYN
Address: 8893 SILVERTHORN RD
City-St-Zip: LARGO, FL 33777

Title: DV () Delete
Name: LUSTIG, BETH
Address: 8893 SILVERTHORN RD
City-St-Zip: LARGO, FL 33777

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: ARNOLD LEIBOVITZ

D/P

04/28/2009

Electronic Signature of Signing Officer or Director

_____ Date