2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000070484

Entity Name: MARKING GROUP, INC.

FILED Mar 05, 2009 Secretary of State

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

11550 NW 56 DR, 107 11550 NW 56 DR. CORAL SPRINGS, FL 33076

#107

CORAL SPRINGS, FL 33076

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Mailing Address: New Mailing Address:

11550 NW 56 DR, 107 PO BOX 8443

CORAL SPRINGS, FL 33075 CORAL SPRINGS, FL 33076

FEI Number: 26-0377040 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

FLORENS, LEA FLORENS, LEA 4630 N UNIVERSITY DR SUITE 408 11550 NW 56 DR.

CORAL SPRINGS, FL 33067 #107 CORAL SPRINGS, FL 33067 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: LEA FLORENS 03/05/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

FLORENS, LEA FLORENS, LEA Name: Name:

4630 N UNIVERSITY DR SUITE 408 11550 NW 56 DR., #107 Address: Address: City-St-Zip: CORAL SPRINGS, FL 33067 City-St-Zip: CORAL SPRINGS, FL 33067

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

RABCHINSKY, SHARON RABCHINSKY, SHARON 4630 N UNIVERSITY DR SUITE 408 11550 NW 56 DR., #107 Address: Address: CORAL SPRINGS, FL 33067 CORAL SPRINGS, FL 33067 City-St-Zip: City-St-Zip:

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

RABCHINSKY, JESSICA RABCHINSKY, JESSICA Name: Name: 4630 N UNIVERSITY DR SUITE 408 11550 NW 56 DR., #107 Address: Address: City-St-Zip: CORAL SPRINGS, FL 33067 City-St-Zip: CORAL SPRINGS, FL 33067

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.

Ρ SIGNATURE: LEA FLORENS 03/05/2009