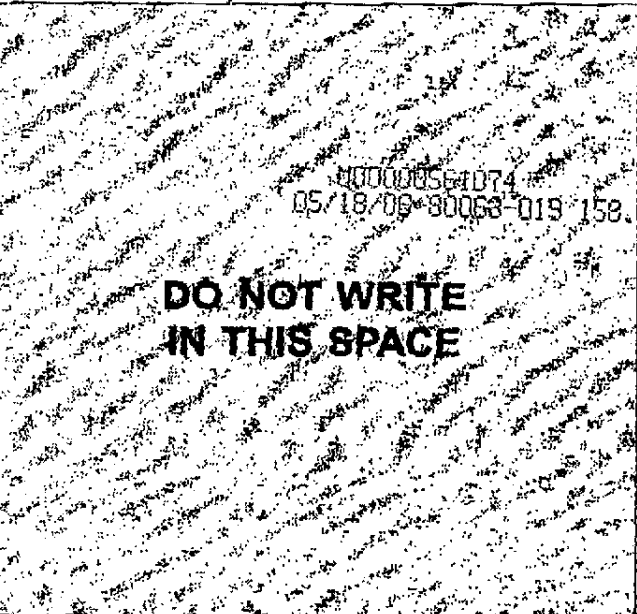
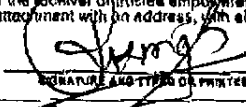


FROM :

FAX NO. :

Apr. 28 2006 05:43 PM P2

May 03, 2006 08:00 AM
Secretary of State**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P93000036591																																										
1. Entry Name INFORMATION TECHNOLOGY GROUP, INC.																																										
Principal Place of Business 3280 OAKMONT TERRACE LONGWOOD, FL 32779 US		Mailing Address 3280 OAKMONT TERRACE LONGWOOD, FL 32779 US																																								
DO NOT WRITE IN THIS SPACE																																										
6. Name and Address of Current Registered Agent SINGH, RAMAKANT 3280 OAKMONT TERRACE LONGWOOD, FL 32779		 0428200R No Chg-P CR2E034 (11/05) 4. (a) EI Number 59-3164869 Applied For Not Applicable 5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required																																								
DO NOT WRITE IN THIS SPACE																																										
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: _____ DATE: _____ Signature must be printed name of registered agent and sign a notifiable. (NOTE: Registered Agent Signature required when address is changed.)																																										
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																								
10. OFFICERS AND DIRECTORS <table border="1"> <tr> <td>TITLE</td> <td>P</td> </tr> <tr> <td>NAME</td> <td>SINGH, RAMAKANT</td> </tr> <tr> <td>STREET ADDRESS</td> <td>3280 OAKMONT TERRACE</td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>LONGWOOD, FL 32779</td> </tr> <tr> <td>TITLE</td> <td>V</td> </tr> <tr> <td>NAME</td> <td>SINGH, KALAWATI</td> </tr> <tr> <td>STREET ADDRESS</td> <td>3280 OAKMONT TERRACE</td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>LONGWOOD, FL 32779</td> </tr> <tr> <td>TITLE</td> <td>CFO</td> </tr> <tr> <td>NAME</td> <td>SINGH, PRAKASH</td> </tr> <tr> <td>STREET ADDRESS</td> <td>3280 OAKMONT TERRACE</td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>LONGWOOD, FL 32779</td> </tr> <tr> <td>TITLE</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> </tr> </table>		TITLE	P	NAME	SINGH, RAMAKANT	STREET ADDRESS	3280 OAKMONT TERRACE	CITY - ST - ZIP	LONGWOOD, FL 32779	TITLE	V	NAME	SINGH, KALAWATI	STREET ADDRESS	3280 OAKMONT TERRACE	CITY - ST - ZIP	LONGWOOD, FL 32779	TITLE	CFO	NAME	SINGH, PRAKASH	STREET ADDRESS	3280 OAKMONT TERRACE	CITY - ST - ZIP	LONGWOOD, FL 32779	TITLE		NAME		STREET ADDRESS		CITY - ST - ZIP		TITLE		NAME		STREET ADDRESS		CITY - ST - ZIP		 400000564074 05/18/06 80068-019 158.75 DO NOT WRITE IN THIS SPACE
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the shareholder or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																										
SIGNATURE: 		04/30/06 407-804-9252 Date: _____ Filing Fee: _____																																								