

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000044606

FILED
Jul 11, 2006
Secretary of State

Entity Name: INVESTORS MARKETING GROUP, INC.

Current Principal Place of Business:

3030 HARTLEY RD.
#390
JACKSONVILLE, FL 32257

Current Mailing Address:

P O BOX 56050
JACKSONVILLE, FL 32241

New Principal Place of Business:

8380 BAYMEADOWS ROAD
SUITE 12
JACKSONVILLE, FL 32256

New Mailing Address:

P O BOX 56050
JACKSONVILLE, FL 32241 US

FEI Number: 65-0499004

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWELL, SUSAN F
3030 HARTLEY RD.
#390
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

POWELL, SUSAN F
8380 BAYMEADOWS ROAD
SUITE 12
JACKSONVILLE, FL 32256 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:

07/11/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: EVD () Delete
Name: POWELL, SUSAN F
Address: 3030 HARTLEY RD #390
City-St-Zip: JACKSONVILLE, FL 32257

Title: SVPT () Delete
Name: BRILL, JOHN M
Address: 15305 DALLAS PKWY. #700
City-St-Zip: ADDISON,, TX 75001

Title: CEOD () Delete
Name: CORCOS, YVES
Address: 15305 DALLAS PKWY. #700
City-St-Zip: ADDISON,, TX 75001

Title: ACS () Delete
Name: TELLES, LUCY
Address: 15305 DALLAS PARKWAY #370
City-St-Zip: ADDISON, TX 75001

Title: PD (X) Delete
Name: DURAND, ROMAIN
Address: 92074 PARIS LA DEFENSE CEDEX
City-St-Zip: PARIS,

Title: CSGC () Delete
Name: VERNE, MAXINE
Address: 199 WATER ST
City-St-Zip: NEW YORK, NY 10038

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: EVD (X) Change () Addition
Name: POWELL, SUSAN F
Address: 8380 BAYMEADOWS ROAD, SUITE 12
City-St-Zip: JACKSONVILLE, FL 32256

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:

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: SUSAN F. POWELL

EVD

07/11/2006

Electronic Signature of Signing Officer or Director

Date