2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000048685

Entity Name: 798 MANAGEMENT GROUP, INC.

FILED Aug 10, 2009 Secretary of State

Current Pr	incipal Place	e of Business:	New Princ	New Principal Place of Business:		
1189 HYPC LANTANA,	DLUXO ROAD FL 33462) US				
Current Mailing Address:			New Mailii	New Mailing Address:		
1189 HYPC LANTANA,	DLUXO ROAD FL 33462) US				
FEI Number:	65-0591814	FEI Number Applied For ()	FEI Number Not Appli	icable ()	Certificate of Status Desired (X)	
Name and	Address of (Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
STERLING BANK 1189 HYPOLUXO ROAD LANTANA, FL 33467 US			1189 HYPC	FRITZ, JR, R. MOYLE 1189 HYPOLUXO ROAD LANTANA, FL 33467 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: R. MOYLE FRITZ, JR 08/10/2009						
Electronic Signature of Registered Agent					Date	
Election Cam	npaign Financin	g Trust Fund Contribution ().				
OFFICERS	AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P (ALBRIGHT, DA 1189 HYPOLU LANTANA, FL	XO ROAD	Title: Name: Address: City-St-Zip:	()(Change ()Addition	
Title: Name: Address: City-St-Zip:	VP (VOGEL, THOM 1189 HYPOLU LANTANA, FL	XO ROAD	Title: Name: Address: City-St-Zip:	()(Change()Addition	
Title: Name: Address: City-St-Zip:	T (SCHOFIELD, V 1189 HYPOLU LANTANA, FL	XO ROAD	Title: Name: Address: City-St-Zip:	D (X) FRITZ, JR, R. M 1189 HYPOLUX LANTANA, FL 33	D ROAD	
Title: Name: Address: City-St-Zip:	S (BAVELIS, GEO 1189 HYPOLU LANTANA, FL	XO ROAD	Title: Name: Address: City-St-Zip:	()(Change ()Addition	
Title: Name: Address: City-St-Zip:	VP (CLARKSON, P 1189 HYPOLU LANTANA, FL	XO ROAD	Title: Name: Address: City-St-Zip:	()	Change ()Addition	

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: R MOYLE FRITZ, JR D 08/10/2009