

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000052765

FILED
Apr 23, 2009
Secretary of State

Entity Name: INVESTMENT SOURCES, INC.

Current Principal Place of Business:

% HOLDING CAPITAL GROUP, INC.
104 CRANDON BLVD., ROOM 419
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

% HOLDING CAPITAL GROUP, INC.
104 CRANDON BLVD., ROOM 419
KEY BISCAYNE, FL 33149

New Mailing Address:

FEI Number: 65-0596667 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOTO, MYRNA
104 CRANDON BLVD.
ROOM 419
KEY BISCAYNE, FL 33149 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: PD () Delete
Name: DONAGHY, JAMES W
Address: 7 RIDGEWOOD DRIVE
City-St-Zip: BRIDGEWATER, CT 06752

Title: VS () Delete
Name: LEISCHNER, STEVEN
Address: 1979 DOGWOOD DRIVE
City-St-Zip: SCOTCH PLAINS, NJ 07076

Title: CD (X) Delete
Name: SPENCER, S.A.
Address: 251 CRANDON BLVD., #164
City-St-Zip: KEY BISCAYNE, FL 33149

Title: AS (X) Delete
Name: DENIS, LYNNE
Address: 630 THIRD AVENUE 7TH FLOOR
City-St-Zip: NEW YORK, NY 10017

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: STEVEN LEISCHNER

VS

04/23/2009

Electronic Signature of Signing Officer or Director

_____ Date