2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2007
Secretary of State

DOCUMENT# P95000074310

Entity Name: TMA CONSULTING GROUP, INC.

Current Principal Place of Business:

1440 PASSPORT LANE
DAYTON, OH 45414

New Principal Place of Business:

Current Mailing Address:

1440 PASSPORT LANE
DAYTON, OH 45414

New Mailing Address:

FEI Number: 65-0608189 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD STE 101
TALLAHASSEE, FL 323012960 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: PT ( ) Delete
Name: ARNOVITZ, MATTHEW E
Address: 1440 PASSPORT LANE
City-St-Zip: DAYTON, OH 45414

Title: VPAT ( ) Delete
Name: ARNOVITZ, ELAINE S
Address: 1440 PASSPORT LANE
City-St-Zip: DAYTON, OH 45414

Title: VP ( ) Delete
Name: ARNOVITZ, SCOTT J
Address: 1490 QUEENS BLVD
City-St-Zip: LOS ANGELES, CA 90069

Title: VP ( ) Delete
Name: ARNOVITZ, MEAD E
Address: EL CASAJAL 512-3
City-St-Zip: LIMA, PERU, PE

Title: VP ( ) Delete
Name: YATES, DOUG
Address: 1490 QUEENS BLVD
City-St-Zip: LOS ANGELES, CA 90069

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:

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: MATTHEW E. ARNOVITZ PRES 01/13/2007

Electronic Signature of Signing Officer or Director — Date