2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

FILED Apr 26, 2006 08:00 Al Secretary of State DOCUMENT # P96000015233 LEGENDS MARKETING GROUP, INC. Principal Place of Business Mailing Address 1747 INDEPENDENCE BLVD. PO BOX 49827 SARASOTA, FL 34230 US SARASOTA, FL 34234 04122006 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3365740 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SCHMOYER, BARRY E DO NOT WRITE 4932 HIDDEN OAKS TRAIL SARASOTA, FL 34237 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when refristating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Added to Fees Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE SCHMOYER, BARRY E NAME 4932 HIDDEN OAKS TRAIL STREET ADDRESS SARASOTA, FL 34232 CITY-ST-ZIP TITLE NAME U000000536522 STREET ADDRESS 05/08/06-80094-002 150.0b CUTY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE City-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CMY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TILLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does indicated on this report or supplemental report is true and apout of the corporation or the receiver or trustee empowered to execute changed, or on an attachment with an address, with a trainer like does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information ocurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director secure this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR