


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Sep 21, 2004 08:00 AM
Secretary of State

DOCUMENT # P96000041276 1. Entity Name CHARM GROUP, INC.	
---	---

Principal Place of Business 32 FAIRWAY COURT ALBANY, NY 12208	Mailing Address 32 FAIRWAY COURT ALBANY, NY 12208
---	---

DO NOT WRITE IN THIS SPACE



09202004 No Chg-P CR2E034 (10/03)

4. FEI Number 58-2249310	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent VOGEL, JAMES D ESQUIRE 3936 TAMiami TRAIL NORTH SUITE B MIDWEST TITLE BLDG. NAPLES, FL 33940	DO NOT WRITE 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BARON, CHARLES 32 FAIRWAY COURT ALBANY, NY 12208
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PURCELL, ANN 33 FAIRWAY COURT ALBANY, NY 12208
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOUSSOUS, HAIDER 38 EAST RIDGE LOUDONVILLE, NY 12211
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000172430
09/21/04-80003-003 558.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **CHARLES J. BARON** **9/29/2004** **58/438-7624**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **PRESIDENT** Date Daytime Phone #