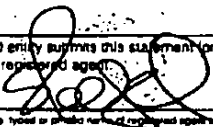
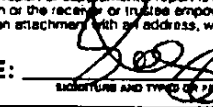


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 19, 2005 8:00 am
Secretary of State

04-05-2005 90049 033 ****50.00
05-19-2005 90045 039 ***100.00

DOCUMENT # P98000031793					
1. Entity Name SG CONGRESS, INC.					
Principal Place of Business 5000 T-REX AVENUE SUITE 150 BOCA RATON, FL 33431			Mailing Address 5000 T-REX AVENUE SUITE 150 BOCA RATON, FL 33431		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
				Country	
4. FEI Number 65-0836799				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
8. Name and Address of Current Registered Agent KOEPEL, JOEL P 222 LAKEVIEW AVENUE SUITE 260 WEST PALM BEACH, FL 33401			7. Name and Address of New Registered Agent Name: Siegel, Ned L. Street Address (P.O. Box Number is Not Acceptable) 5000 T-REX AVE STE 150 City: Boca Raton FL 33431		
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:  DATE: 3-29-05					
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees					
FILE NOW!!! FEB 18 \$150.00 After May 1, 2005 Fee will be \$350.00					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	SIEGEL, NED L.		NAME		
STREET ADDRESS	5000 T-REX AVENUE, SUITE 150		STREET ADDRESS		
CITY-STATE-ZIP	BOCA RATON, FL 33431		CITY-STATE-ZIP		
TITLE	V	☐ Delete	TITLE	☐ Change	☐ Addition
NAME	GRUNDT, BRUCE S		NAME		
STREET ADDRESS	5000 T-REX AVENUE SUITE 150		STREET ADDRESS		
CITY-STATE-ZIP	BOCA RATON, FL 33431		CITY-STATE-ZIP		
TITLE	V	☐ Delete	TITLE	☒ Change	☐ Addition
NAME	ROTTMAN, FRED		NAME	Rothman, Fred	
STREET ADDRESS	5000 T-REX AVE STE. 150		STREET ADDRESS	5000 T-REX AVE STE 150	
CITY-STATE-ZIP	BOCA RATON, FL 33431		CITY-STATE-ZIP	BOCA RATON FL 33431	
TITLE		☐ Delete	TITLE	☐ Change	☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-STATE-ZIP			CITY-STATE-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-STATE-ZIP			CITY-STATE-ZIP		
TITLE		☐ Delete	TITLE	☐ Change	☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-STATE-ZIP			CITY-STATE-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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:  DATE: 3-29-05 561-978-7200					
SIGNATURE AND TYPED OR PRINTED NAME OF SAGING OFFICER OR DIRECTOR					