2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000038464

Entity Name: MARCOSCHAMER GROUP, INC.

FILED Apr 28, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2000 ISLAND BLVD. 6000 ISLAND BLVD. SUITE 1910 SUITE 1205

WILLIAMS ISLAND, FL 33160 WILLIAMS ISLAND, FL 33160 US

Current Mailing Address: New Mailing Address:

2000 ISLAND BLVD. 6000 ISLAND BLVD.

SUITE 1910 SUITE 1205

WILLIAMS ISLAND, FL 33160 WILLIAMS ISLAND, FL 33160 US

FEI Number: 65-0914360 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MARCOSCHAMER, SAMUEL M
MARCOSCHAMER, SAMUEL M

2000 ISLAND BLVD. 6000 ISLAND BLVD.

SUITE 1910 SUITE 1205

WILLIAMS ISLAND, FL 33160 US WILLIAMS ISLAND, FL 33160 US

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: 04/28/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition MARCOSCHAMER, SAMUEL M MARCOSCHAMER, SAMUEL M Name: Name: 2000 ISLAND BLVD. SUITE 1910 6000 ISLAND BLVD. SUITE 1205 Address: Address: City-St-Zip: WILLIAMS ISLAND, FL 33160 City-St-Zip: WILLIAMS ISLAND, FL 33160 US

Title: () Delete Title: S/D (X) Change () Addition MARCOSCHAMER, HELEN Name: Name: MARCOSCHAMER, HELEN 2000 ISLAND BLVD. SUITE 1910 6000 ISLAND BLVD. SUITE 1205 Address: Address: WILLIAMS ISLAND, FL 33160 WILLIAMS ISLAND, FL 33160 US City-St-Zip: City-St-Zip:

Title: M/D () Delete Title: M/D (X) Change () Addition Name: MARCOSCHAMER, YAIR Name: MARCOSCHAMER, YAIR Address: 2000 ISLAND BLVD. SUITE 1910 Address: 6000 ISLAND BLVD. SUITE 1205

City-St-Zip: WILLIAMS ISLAND, FL 33160 City-St-Zip: WILLIAMS ISLAND, FL 33160 US

Title: T/D () Delete Title: T/D (X) Change () Additional City-St-Zip: Title: Title: T/D (X) Change () Additional City-St-Zip: Title: Title: Title: Title: T/D (X) Change () Additional City-St-Zip: Title: Title: Title: T/D (X) Change () Additional City-St-Zip: Title: Titl

Title: T/D () Delete Title: T/D (X) Change () Addition MARCOSCHAMER, JONATHAN MARCOSCHAMER, JONATHAN Name: Name: Address: 2000 ISLAND BLVD. SUITE 1910 Address: 6000 ISLAND BLVD. SUITE 1205 City-St-Zip: WILLIAMS ISLAND, FL 33160 City-St-Zip: WILLIAMS ISLAND, FL 33160 US

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: SAMUEL M. MARCOSCHAMER P/D 04/28/2006