## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## FILED Feb 09, 2006 08:00 AN Secretary of State

Daytime Phone #

Data

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1. Entity Nar	IMENT # S41134	AT D	Secretary of State			
UNITED	STATES MANUFACTURERS G	ROUP, INC.				
Principal Plac	ce of Business M	ailing Address	1 4 2 4			· -
{	•	041 SW 47TH AVE		}		
4041 SW 47TH AVE   FT LAUDERDALE, FL 33314-4023   FT LAUDERDALE, FL 33314-4023						
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DO NOT WRITE IN THIS SPACE			した	4. FEI Numbe	er	Applied For
				65-0269		Not Applicable
				5 Cantinata	at Ctatus Dankad	\$8.75 Additional
				3. Centificate	of Status Desired	Fee Required
	6. Name and Address of Current Regis	tered Agent		<del></del>		and the second second
			7			
FILINGS	NC			DO	NOT WOIT	'E
3732 NW 16TH ST			DO NOT WRITE			
FT LAUDERDALE, FL 33311			IN THIS SPACE			
				11.4 1	TIIS STAC	<b>L</b>
	e named entity submits this statement for the $ ho$ tions of registered agent.	urpose of changing its registe	red office or register	red aĝent, or boli	h, in the State of Florida. I ar	n familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title in	f applicable (NOTE Register	ed Agent signature required	when reinstating)	DATE	
			≟ .	3		
FIL	E NOW!!! FEE IS \$150.00	<ol><li>Election Campaign Fina</li></ol>	noing \$5	.00 <u>M</u> ay Be		
After M	ay 1, 2006 Fee will be \$550.00	Trust Fund Contribution	. LJ Add	ed to Fees		
10.	OFFICERS AND DIREC	TORS	r			
RILE	D		1			
NAME	DORNAU, PETER					
STREET ADDRESS	4041 SW 47TH AVE	1100000426888				
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TITLE	D		ł			
NAME	DORNAU, MAUREEN					
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CITY - ST - ZIP	<u> </u>			DC	IACI AAIZII	L.,
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City - ST-ZiP	<u> </u>		<u> </u>			<del>,</del>
12. I hereby o	certify that the information supplied with this fill	ing does not qualify for the ex	emptions contained	I in Chapter 119	Florida Statutes, I further co	ertify that the information
indicated of the cor	certify that the information supplied with this his on this report or ampliture its report is true a poration or the receiver or trustee employeered , or on an attachment with an address, with an	ing accurate and that my signs to execute this report as redu	uure snall nave the t ired by Chapter 607	same regarerrect r, Florida Statutes	, as it made under oath; that s; and that my name appears	in Block 10 or Block 11 if
changed.	or on an attachment with an address, with air	other like empowered.				