2007 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 18, 2007 8:00 am ANNUAL REPORT **Secretary of State** DOCUMENT # V40662 1. Entity Name 01-18-2007 90091 020 ***150.00 TRU-TECH GROUP, INC. Principal Place of Business Mailing Address West Polm Beach, FL. 33401 3349 ST MALO CT 3349-ST-MALO CT PALM BEACH GARDENS, Ft 33410 PALM BEACH GARDENS, FL 33410 CR2E034 (11/05) 01112007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0350478 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FINESTONE, ARNOLD B DO NOT WRITE 2400 PRESIDENTIAL WAY WEST PALM BEACH, FL 33401 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150:00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE BLOCH, BEATRICE NAME STREET ADDRESS 3349 ST. MALO CT. 12 CITY-ST-ZIP PALM BEACH GARDENS, FL TITLE WIENER, HOWARD A STREET ADDRESS 13245 VERDUN DRIVE CITY-ST-ZIP PALM BEACH GARDENS, FL TITLE FINESTONE, ARNOLD B NAME 2400 PRESIDENTIAL WAY STREET ADDRESS DO NOT WRITE CITY-ST-ZIP WEST PALM BEACH, FL 33401 IN THIS SPACE CEOD TITLE NAME BLOCH, LAURENCE P. O. BOX 2273 STREET ADDRESS RANCHO SANTA FE, CA CITY-ST-ZIP TITLE KOPPELMAN, ROBERT P NAME STREET ADDRESS 35 E 85TH ST

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental seport 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 trustife 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 a address, with all other like empowered.

SIGNATURE

CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

NEW YORK, NY 10028

HEMULA 9 FINESTON &

11/07 30/654 0446 Date Daysime Phone #

FILED