

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

	. 7-1.2-1501(e), each corp	oration failing or refusin	ORT MUST BE TYPED OF g to file its annual report within			
1. Corporate ID No. 141798	2. Name of Corporation	ENT FINANCIA	AL MARKETING (GROUP, INC.		
3. Street Address Principal Busine	rs Office TANVILLE K	10. STE 7	PURCHASE	State NY	10577	
4. Business Phone No. 617-423-3	3644	5. State of Incorporation DELAWAT	RE			
6. Brief Description of the Character HOLDING CO	ી					
7. NAMES AND ADDRESS	ES OF THE OFFICERS	: ("X" BOX FOR ATTA	199200000000000000 0 00033888888999	S BEFORE USING ATT	ACHMENTS	
DAN ARNOLD			Vice President Name			
200 S. COLLEGE STREET, 21 ST FL			Street Address			
CHARLOTTE	State NC	^{Zip} 28202	Ctry	State	Zij)	
Secretary Name DAN ARNOLD			Treasurer Name			
Street Address 200 S. COLLEGE STREET, 21 ST FL			Street Address			
CHARLOTTE	State NC	^{Zip}	Сйу	State	Zip	
8. NAMES AND ADDRESS	ES OF THE DIRECTOR	S: ("X" BOX FOR ATT	ACHMENT) 🔲 FILL IN SPAC	ES BEFORE USING A	PTACHMENTS	
DAN ARNOLD			Director Name			
200 S. COLLEGE STREET, 21 STFL			Street Address			
CHARLOTTE	State NC	28202	City	State	Zip	
Director Name C. WILLIAM MAHER			Director Name			
9785 TOWNE CENTRE DRIVE			Street Address			
SAN DIEGO	State CA	Zap 2121-1968	Сиу	State	Zip	
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) AUTHORIZED SHARES			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value	
1000	Common	# .01	1000	Common	#.01	
This report must be execute this report must be execute			d representative. If the corpora or trustee.	tion is in the hands of	a receiver or trustee.	
			Under penalty of perjury,	I declare and affirm that I	have examined this report	
			including any accompany			

File Date	
Check No.	1932P
Бу ——	
FOR SECRET	ARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that including any accompanying schedules and statem contained herein are true and correct.	nents, an	d that all	statemer	
1 le la la		2/21	108	
Signature	Date	7		_
DAN ARNOLD				٠
Print or Type Name				
SECRETARY -				
Title	Form	1 630 Pau	12/06	