


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2005 8:00 am
Secretary of State

02-07-2005 90090 017 ***150.00

DOCUMENT # F04000001985			
1. Entity Name 422 INCORPORATED			
Principal Place of Business 565 VINE AVE. #1 WEST HIGHLAND PARK, IL 60035		Mailing Address 565 VINE AVE. #1 WEST HIGHLAND PARK, IL 60035	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
BECKER, DEAN J 101 N. CLEMENS ST. - SUITE 510 WEST PALM BEACH, FL 33401		Name <u>Dean J. Becker</u> Street Address (P.O. Box Number is Not Acceptable) <u>126 Seaview Ave.</u> City <u>Palm Beach</u> FL Zip Code <u>33480</u>	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST BECKER, DEAN J 126 SEAVIEW AVE. PALM BEACH, FL 33480 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LIPSCHULTZ, MARLENE 4444 GREENBAY ROAD HIGHLAND PARK, IL 60035 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO Robert Gordon <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4207 Stanford St. Chevy Chase, MD 20815
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Ross Goldstein <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 132 W 31st St - Ste 1102 NY, NY 10001
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Warren Packard <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 2882 Sand Hill Rd - Ste 150 Menlo Park, CA 94025
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Edward D. Horowitz <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 670 W. End Ave #16D NY, NY 10025
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D James Mooney <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 552 Anderson Hill Rd. Purchase, NY 10577
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u>Dean J. Becker Chairman</u>		Date <u>2/5/07</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone # _____	

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01042005 Chg-P CR2E034 (10/03)

4. FEI Number 36-4463448 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required