

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004184

**FILED**  
**Jan 18, 2008**  
**Secretary of State**

**Entity Name:** LOVETT,SILVERMAN CONSTRUCTION CONSULTANTS, INC.

**Current Principal Place of Business:**

380 TOWN LINE ROAD  
STE 130  
HAUPPAUGE, NY 11788

**New Principal Place of Business:**

898 VETERANS MEMORIAL HIGHWAY  
SUITE 240  
HAUPPAUGE, NY 11788

**Current Mailing Address:**

380 TOWN LINE ROAD  
STE 130  
HAUPPAUGE, NY 11788

**New Mailing Address:**

898 VETERANS MEMORIAL HIGHWAY  
SUITE 240  
HAUPPAUGE, NY 11788

**FEI Number:** 11-2925334

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

INCORPORATING SERVICES, LTD  
1540 GLENWAY DRIVE  
TALLAHASSEE, FL 32301 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: CPS ( ) Delete  
Name: LOVETT, JOHN  
Address: 380 TOWN LINE ROAD  
City-St-Zip: HAUPPAUGE, NY 11788

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CPS (X) Change ( ) Addition  
Name: LOVETT, JOHN  
Address: 898 VETERANS MEMORIAL HIGHWAY SUITE 240  
City-St-Zip: HAUPPAUGE, NY 11788

I hereby certify that the information supplied with this filing does not qualify 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: JOANNE KONG

MS

01/18/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date