

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90181 006 ****61.25

DOCUMENT # P30862

1. Entity Name

SHOPLIFTERS ANONYMOUS, INC.



Principal Place of Business

380 NORTH BROADWAY
STE. 206
JERICHO NY 11753

Mailing Address

380 NORTH BROADWAY
STE. 206
JERICHO NY 11753

14020222



MOORE CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

22-3010584

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BERLIN, PETER
19111 COLLINS AVENUE - UNIT 501
SUNNY ISLES FL 33160

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME LANE, ROBERT C. Delete
STREET ADDRESS 1931 SABAL PALM DRIVE
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD
NAME LEVY, ROBERT S ACSW Delete
STREET ADDRESS 475 PARK AVE SOUTH
CITY-ST-ZIP NEW YORK NY 10016

TITLE Change Addition
NAME D
STREET ADDRESS
CITY-ST-ZIP

TITLE SD
NAME LEWIS, JAMES, JR. Delete
STREET ADDRESS 731 FRANKLIN ST
CITY-ST-ZIP WESTBURY NY

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME BERLIN, PETER D Delete
STREET ADDRESS 380 NORTH BROADWAY
CITY-ST-ZIP JERICHO NY

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME RUST, PETER Delete
STREET ADDRESS 4 MACKAY WAY
CITY-ST-ZIP ROSLYN NY 11576

TITLE Change Addition
NAME
STREET ADDRESS 55 Broad Street-22nd Floor
CITY-ST-ZIP New York, NY 10004

TITLE D
NAME ROSENBERG, BRAD Delete
STREET ADDRESS 255 EXECUTIVE DR., STE. 105
CITY-ST-ZIP PLAINVIEW NY 11803

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 617, 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/04

Date

516-932-0165

Daytime Phone #