2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 851207

Entity Name: ROTHSCHILD LIEBERMAN LTD. INC.

FILED Jan 02, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
411 W PUTNAM AVE- STE 420 GREENWICH, CT 06830				280 RAILROAD AVENUE GREENWICH, CT 06830	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
411 W PUTNAM AVE- STE 420 GREENWICH, CT 06830				280 RAILROAD AVENUE GREENWICH, CT 06830	
FEI Number:	: 13-3082260	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
1201 HAYS SUITE 105	SSTREET	CORPORATION SYSTEM INC. 101 US			
	named entity e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (LIEBERMAN, \$ 147 SKYVIEW STAMFORD, C	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S (LIEBERMAN, N 147 SKYVIEW STAMFORD, C	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: SAMUEL LIEBERMAN PRES 01/02/2008