2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2009
Secretary of State

DOCUMENT# F02000004549

Entity Name: MORVEN INDUSTRIES, INC.

Current Principal Place of Business:

5700 LAKE WORTH ROAD, STE. 108
LAKE WORTH, FL 33463

New Principal Place of Business:

5700 LAKE WORTH ROAD, STE. 108
108
LAKE WORTH, FL 33463

Current Mailing Address:

5700 LAKE WORTH ROAD, STE. 108
LAKE WORTH, FL 33463

New Mailing Address:

5700 LAKE WORTH ROAD, STE. 108
108
LAKE WORTH, FL 33463

FEI Number: 22-3241318 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
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: VC ( ) Delete
Name: SUBOTNICK, STUART
Address: 21 MAIN ST
City-St-Zip: HACKENSACK, NJ 07601

Title: DP ( ) Delete
Name: LEBER, ALAN H
Address: 10737 NORTHGREEN DR.
City-St-Zip: LAKE WORTH, FL 33467

Title: V ( ) Delete
Name: CEVOLI, OAYK
Address: 21 MAIN ST
City-St-Zip: HACKENSACK, NJ 07601

Title: S ( ) Delete
Name: PERSING, DAVID A
Address: 21 MAIN ST
City-St-Zip: HACKENSACK, NJ 07601

Title: T ( ) Delete
Name: MARESCA, ROBERT A
Address: 21 MAIN ST
City-St-Zip: HACKENSACK, NJ 07601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: ALAN H. LEBER PRES 01/05/2009

Electronic Signature of Signing Officer or Director — Date