



# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 31, 2006 8:00 am**  
**Secretary of State**

05-31-2006 90009 018 \*\*\*550.00

<b>DOCUMENT # F02000005262</b> 1. Entity Name LIQUIDATION PROPERTIES, INC.			
Principal Place of Business 388 GREENWICH STREET NEW YORK, NY 10013		Mailing Address CITIGROUP GLOBAL MARKET, INC. 388 GREENWICH STREET 22ND FL NEW YORK, NY 10013	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip      Country		3. Mailing Address <i>3800 Citigroup Center Dr.</i> Suite, Apt. #, etc. <i>G-2-18</i> City & State <i>Tampa, FL</i> Zip <i>33610</i> Country	
		<b>50020033</b> 	
		05172006      Chg-P      CR2E034 (11/05)	
		4. FEI Number 52-2266507	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ (NOTE: Registered Agent signature required when reinstating)      DATE _____			
<b>FILE NOW!!! FEE IS \$550.00</b> <b>Due by September 6, 2006</b>		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P ISENBERG, RICHARD % 390 GREENWICH STREET, 4TH FL NEW YORK, NY 10013 <input checked="" type="checkbox"/> Delete	TITLE	Randall Costantini 390 Greenwich St. New York, NY 10013 Asst. Secretary Robyn Gorkes 3800 Citigroup Center Dr. Tampa, FL 33610 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	V SEARES, PHIL % 390 GREENWICH STREET, 4TH FL NEW YORK, NY 10013 <input type="checkbox"/> Delete	TITLE	
TITLE	V MILLS, SUSAN % 390 GREENWICH STREET, 4TH FL NEW YORK, NY 10013 <input type="checkbox"/> Delete	TITLE	
TITLE	V REEDY, DAVID % 390 GREENWICH STREET, 4TH FL NEW YORK, NY 10013 <input type="checkbox"/> Delete	TITLE	
TITLE	T FREIDENRICH, SCOTT 388 GREENWICH ST NEW YORK, NY 10013 <input type="checkbox"/> Delete	TITLE	
TITLE	AT ANZEL, KEITH % 388 GREENWICH STREET, 22ND FL NEW YORK, NY 10013 <input type="checkbox"/> Delete	TITLE	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			
		Date _____      Daytime Phone # _____	