

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001377

FILED
Jan 23, 2007
Secretary of State

Entity Name: KICKAPPS CORPORATION

Current Principal Place of Business:

180 WEST 20TH STREET #9
NEW YORK, NY 10011

New Principal Place of Business:

29 WEST 38TH STREET, 5TH FLOOR
NEW YORK, NY 10018

Current Mailing Address:

180 WEST 20TH STREET #9
NEW YORK, NY 10011

New Mailing Address:

29 WEST 38TH STREET, 5TH FLOOR
NEW YORK, NY 10018

FEI Number: 71-0993569

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CHRM () Delete
Name: ALTERMAN, ERIC
Address: 180 WEST 20TH STREET #9
City-St-Zip: NEW YORK, NY 10011

Title: PT () Delete
Name: ALTERMAN, ERIC
Address: 180 WEST 20TH STREET #9
City-St-Zip: NEW YORK, NY 10011

Title: D () Delete
Name: POLITO, SANTO
Address: ONE CAMBRIDGE CENTER 4TH FLOOR
City-St-Zip: CAMBRIDGE, MA 02142

Title: S () Delete
Name: CLARK, PETER
Address: 200 AZALEA AVENUE
City-St-Zip: ST AUGUSTINE, FL 32080

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHRM (X) Change () Addition
Name: ALTERMAN, ERIC
Address: 29 WEST 38TH STREET, 5TH FLOOR
City-St-Zip: NEW YORK, NY 10018

Title: CEO (X) Change () Addition
Name: BLUM, ALEX
Address: 29 WEST 38TH STREET, 5TH FLOOR
City-St-Zip: NEW YORK, NY 10018

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 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: MATTHEW TURNER

CONT

01/23/2007

Electronic Signature of Signing Officer or Director

Date