2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000207

230 SOUTH BROAD ST

PHILADELPHIA, PA 19102

Address:

City-St-Zip:

Entity Name: EBL&S PROPERTY MANAGEMENT, INC

FILED Mar 20, 2009 Secretary of State

	er Eblact	TOT EITH WOUND COMMENT,				
Current P	rincipal Plac	e of Business:	New Prin	New Principal Place of Business:		
	'H BROAD ST .PHIA, PA 19'	, MEZZANINE FLOOR 102				
Current M	lailing Addre	ss:	New Mail	ing Address:		
	'H BROAD ST .PHIA, PA 19'	, MEZZANINE FLOOR 102				
FEI Number:	: 23-2597712	FEI Number Applied For ()	FEI Number Not App	olicable () C	ertificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and	l Address of Nev	v Registered Agent:	
155 OFFIC	RED AGENTS DE PLAZA DR SSEE, FL 323	LEGAL SERVICES, LLC IVE, SUIE A 101 US				
	named entity e of Florida.	submits this statement for the	e purpose of changing	its registered offic	e or registered agent, or both,	
SIGNATUR	RE:					
	Electro	nic Signature of Registered A	gent		Date	
Election Car	mpaign Financir	g Trust Fund Contribution ().				
OFFICER	S AND DIREC	CTORS:	ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	CP (LIPKIN, EDWA 230 SOUTH BI PHILADELPHI	ROAD ST	Title: Name: Address: City-St-Zip:	() Ch	nange () Addition	
Title: Name: Address: City-St-Zip:	VP (LEVY, HOWAF 230 SOUTH BI PHILADELPHI	ROAD ST	Title: Name: Address: City-St-Zip:	() Ch	nange () Addition	
Title: Name: Address: City-St-Zip:	S (X ROSCHER, DA 230 SOUTH BI PHILADELPHI	ROAD ST	Title: Name: Address: City-St-Zip:	() Ch	nange () Addition	
Title: Name:	T (SIMONER, DA) Delete VID	Title: Name:	T (X) Ch SIMON, DAVID	nange()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.

Address:

City-St-Zip:

230 SOUTH BROAD ST

PHILADELPHIA, PA 19102

SIGNATURE: EDWARD LIPKIN PRES 03/20/2009