2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2009
Secretary of State

DOCUMENT# F07000005190

Entity Name: KLIK TECHNOLOGIES, CORP.

Current Principal Place of Business:

4 NO. MAIN STREET
SPRING VALLEY, NY 10977

New Principal Place of Business:

711 EXECUTIVE BLVD. SUITE H
VALLEY COTTAGE, NY 10989

Current Mailing Address:

4 NO. MAIN STREET
SPRING VALLEY, NY 10977

New Mailing Address:

711 EXECUTIVE BLVD. SUITE H
VALLEY COTTAGE, NY 10989

FEI Number: 13-4087066 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: C ( ) Delete
Name: SIROTA, RICHARD
Address: 4 NO. MAIN STREET
City-St-Zip: SPRING VALLEY, NY 10977

Title: P ( ) Delete
Name: GUSTAVE, JONATHAN
Address: 4 NO. MAIN STREET
City-St-Zip: SPRING VALLEY, NY 10977

Title: COOS ( ) Delete
Name: JONES, DAVID
Address: 4 NO. MAIN STREET
City-St-Zip: SPRING VALLEY, NY 10977

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change ( ) Addition
Name: SIROTA, RICHARD
Address: 711 EXECUTIVE BLVD. SUITE H
City-St-Zip: VALLEY COTTAGE, NY 10989

Title: P (X) Change ( ) Addition
Name: GUSTAVE, JONATHAN
Address: 711 EXECUTIVE BLVD. SUITE H
City-St-Zip: VALLEY COTTAGE, NY 10989

Title: COOS (X) Change ( ) Addition
Name: JONES, DAVID
Address: 711 EXECUTIVE BLVD. SUITE H
City-St-Zip: VALLEY COTTAGE, NY 10989

Title: CON ( ) Change (X) Addition
Name: VALERIE, DESHARNAIS
Address: 711 EXECUTIVE BLVD. SUITE H
City-St-Zip: VALLEY COTTAGE, NY 10989

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: VALERIE A. DESHARNAIS CON 01/27/2009
Electronic Signature of Signing Officer or Director Date