2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 18, 2005 8:00 am Secretary of State

1. Entity Name MIP, INC.				07-18-2005	90038 01	17 ***150	0.00				
385 CLINTON AVE P.O. BOX 52	Mailing Address 385 CLINTON AVE P.O. BOX 52 WYCKOFF, NJ 07481 US			484040 33							
2. Principal Place of Business One, Lethbridge Plaza One, Lethbridge			IAZA III								
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.		<u> </u>	070720		CR2E03	34 (10/03)					
Mahwah NJ 1	City & State Nahwah	TN	4. FEI N	umber 2207360		No	plied For t Applicable				
07430 USA	^{Zip} 07430	Country	5. Certif	icate of Status Desired		\$8.75 Add Fee Required	itional 1				
6. Name and Address of Current Reg	istered Agent	Name	7. Name	and Address of New I	Registered A	gent					
CIOFFI, JAMES A. ESQ.		Street Address (P.O. Box Number is Not Acceptable)									
250 TEQUESTA DRIVE, SUITE #200 TEQUESTA, FL 33469											
*		City			FL	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. 1 am familiar with, and accept											
the obligations of registered againt.											
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OATE											
FILE NOWIII FEE IS \$150.00 Due by September 7, 2005 9. Election Campaign Financing Trust Fund Contribution. 9. Election Campaign Financing Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.											
	1		\$5.00 May E Added to Fees	In accordance corporation did	with s. 607. I not receive	193(2)(b), the prior r	F.S., the notice.				
Due by September 7, 2005 10. OFFICERS AND DIRI	Trust Fund Contri	bution.	Added to Fees	In accordance corporation did	not receive	the prior r	otice. S IN 11				
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Due by September 7, 2005	Trust Fund Contri	11.	Added to Fees	corporation did	not receive	the prior r	otice. S IN 11				
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 eath; 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.

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/7/05 201-831-0505