

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F88812

Entity Name: MIP, INC.

**FILED**  
**Feb 10, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

ONE LETHBRIDGE PLAZA  
SUITE 30  
MAHWAH, NJ 07430 US

**New Principal Place of Business:**

**Current Mailing Address:**

ONE LETHBRIDGE PLAZA  
SUITE 30  
MAHWAH, NJ 07430 US

**New Mailing Address:**

FEI Number: 59-2207360

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CIOFFI, JAMES A. ESQ.  
250 TEQUESTA DRIVE, SUITE #200  
TEQUESTA, FL 33469 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: BOMMER, STEPHEN K  
Address: ONE LETHBRIDGE PLAZA  
City-St-Zip: MAHWAH, NJ 07430

Title: VTD  
Name: WILLIAMSON, JR, WILLIAM  
Address: ONE LETHBRIDGE PLAZA  
City-St-Zip: MAHWAH, NJ 07430

I hereby 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 all other like empowered.

SIGNATURE: STEPHEN K. BOMMER

PD

02/10/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date