


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2004 8:00 am
Secretary of State

01-29-2004 90095 036 ***158.75

DOCUMENT # G88563			
1. Entity Name VICKY LIEBER ENTERPRISES, INC.			
Principal Place of Business 2875 GLEN HOLLOW DRIVE CLEARWATER, FL 33761		Mailing Address 2875 GLEN HOLLOW DRIVE CLEARWATER, FL 33761	
2. Principal Place of Business 785 WESTFIELD COURT Suite, Apt. #, etc.		3. Mailing Address 785 WESTFIELD COURT Suite, Apt. #, etc.	
City & State DUNEDIN, FL Zip 34698 Country USA		City & State DUNEDIN, FL Zip 34698 Country USA	
4. FEI Number 59-2379396		Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LIEBER, VICKY L 2875 GLEN HOLLOW DRIVE CLEARWATER, FL 33761		7. Name and Address of New Registered Agent Name: MARCI SPERBER Street Address (P.O. Box Number is Not Acceptable): 785 WESTFIELD COURT City: DUNEDIN FL Zip Code: 34698	
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u>Marci Sperber</u> <u>Marci Sperber</u> <u>1/27/04</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD LEVINE LIEBER, VICKY 2875 GLEN HOLLOW DRIVE CLEARWATER, FL 33761 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD LEVINE LIEBER, VICKY 785 WESTFIELD COURT DUNEDIN, FL 34698 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Vicky Levine Lieber</u> VICKY LEVINE LIEBER		Date: <u>1/27/04</u> (727) 736-5803	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	