2006 LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT # L04000001947 1. Entity Name LIPPY INVESTMENTS, LLC Mailing Address Principal Place of Business 827 NE 20TH AVENUE 827 NE 20TH AVENUE FORT LAUDERDALE, FL 33304 US FORT LAUDERDALE, FL 33304 01052006 No Chg-LLC DO NOT WRITE IN THIS SPACE 4. FEI Number 20-0562034 5. Certificate of Status Desired 5. Name and Address of Current Registered Agent SHARP, KENDALL 720 NE 18TH AVENUE FORT LAUDERDALE, FL 33304

FILED Jan 12, 2006 08:00 AM Secretary of State

CR2E083 (11/05)

Applied For Not Applicable

\$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

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 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 agent. 			
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE, Registered Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2006			1100000384488 01/17/06-80014-004 50.00
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES SHARP, KENDALL F PRES. 827 NE 20TH AVE. FT. LAUDERDALE, FL 33304		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE
TITLE NAME STREET ADDRESS CITY+ST-ZIP		DO	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN 7	THIS SPACE
THLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET AUDRESS CITY-ST-ZIP			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee emparaged to execute this report as required by Chapter 608, Florida Statutes.			

R, OR AUTHORIZED REPRESENTATIVE

PRINTED NAME OF SIGNING MANAGING MEUB