2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000141

Entity Name: LIQUIDEBT, INC.

City-St-Zip:

LONGWOOD, FL 32779

FILED Apr 24, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1060 MAITLAND CENTER COMMONS 1307 SOUTH INTERNAITONAL PARKWAY

SUITE 270 SUITE 1071

MAITLAND, FL 32751 LAKE MARY, FL 32746

Current Mailing Address: New Mailing Address:

1060 MAITLAND CENTER COMMONS 1307 SOUTH INTERNAITONAL PARKWAY

SUITE 270 SUITE 1071

MAITLAND, FL 32751 LAKE MARY, FL 32746

FEI Number: 30-0154424 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HOPPER, PETER HOPPER, PETER

1060 MAITLAND CENTER COMMONS 1307 SOUTH INTERNAITONAL PARKWAY SUITE 270 SUITE 1071

SUITE 270 SUITE 1071
MAITLAND, FL 32751 US LAKE MARY, FL 32746 US

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: PETER HOPPER 04/24/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

City-St-Zip:

LAKE MARY, FL 32746

itle: D () Delete Title: D (X) Change () Addition

Name: HOPPER, WENDY Name: HOPPER, PETER
Address: 30 STONE GATE SOUTH Address: 1307 SOUTH INTERNAITONAL PARKWAY

Title: D () Delete Title: D (X) Change () Addition

 Name:
 COMERFORD, ADRIEANNE
 Name:
 SIMMS, MATTHEW

 Address:
 550 PARK AVENUE
 Address:
 20 STUYVESANT OVAL

 City-St-Zip:
 MANHASSET, NY 11030
 City-St-Zip:
 NEW YORK, NY 10009

Title: D () Delete Title: D (X) Change () Addition

 Name:
 HOPPER, VIRGINIA
 Name:
 SANTANGELO, MATTHEW

 Address:
 550 PARK AVENUE
 Address:
 74 ALMOND STREET

 City-St-Zip:
 MANHASSET, NY 11030
 City-St-Zip:
 STATEN ISLAND, NY 10312

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER HOPPER D 04/24/2007