
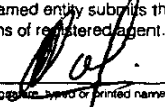
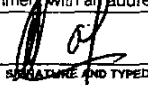


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2008 8:00 am
Secretary of State

04-11-2008 90058 012 ***150.00

DOCUMENT # P02000051693 1. Entity Name LIZ ADVERTISING INC			
Principal Place of Business 3403 NW 82ND AVE #290 DORAL, FL 33172		Mailing Address 3403 NW 82ND AVE #290 DORAL, FL 33172	
2. Principal Place of Business - No P.O. Box # 3403NW82ND AVE Suite, Apt. #, etc. # 290 City & State DORAL, FL Zip 33122 Country USA		3. Mailing Address 3403NW82ND AVE Suite, Apt. #, etc. # 290 City & State DORAL, FL Zip 33122 Country USA	
4. FEI Number 01-0685120		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ALAYON, LISSETTE 3403 NW 82ND AVE #290 DORAL, FL 33172		7. Name and Address of New Registered Agent Name ALAYON, LISSETTE Street Address (P.O. Box Number is Not Acceptable) 3403 NW 82ND AVE # 290 City DORAL, FL FL Zip Code 33122	
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:  LISSETTE ALAYON 04/07/2008 <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, 2008 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 PD NAME ALAYON, LISSETTE STREET ADDRESS 10560 N W 27 ST STE 101-A CITY-ST-ZIP DORAL, FL 33172	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. 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 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:  LISSETTE ALAYON <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		04/07/08 786-552-5024 <small>Date Daytime Phone #</small>	

ATTACHMENT

40066039

#P02000051693

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: LIZ ADVERTISING INC
2. The principal office address: 3403 NW 82nd AVE # 290
DORAL, FL 33122
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 05/10/2002 Document number: P02000051693
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

ALAYON, LISSETTE
10560 NW 27 ST - STE 101-A
DORAL, FL 33172

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

ALAYON, LISSETTE
3403 NW 82 AVE - STE 290
(P.O. Box NOT acceptable)
DORAL, FL 33122

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

(Signature of an officer or director)

Lisette ALAYON - President
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

(Signature of Registered Agent)

03/28/2007
(Date)

If signing on behalf of an entity:

LISSETTE ALAYON
(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR21045 (8/05)

ATTACHMENT 40066039

#P02000051693

LIZ ADVERTISING, INC

16018

INVOICE NUMBER	DESCRIPTION	AMOUNT	DISCOUNT TAKEN	NET AMOUNT

CHECK DATE	CHECK NUMBER	PAYEE NAME	TOTAL AMOUNT	DISCOUNT	CHECK AMOUNT
03/28/2007	16018	FLORIDA DEPARTMENT	35.00	0.00	**35.00