

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000116777

Entity Name: LILY & FROG, INC.

FILED
Jul 12, 2005
Secretary of State

Current Principal Place of Business:

620 N US HWY 1
TEQUESTA, FL 33469

New Principal Place of Business:

605 NORTHLAKE BOULEVARD
NORTH PALM BEACH, FL 33408

Current Mailing Address:

620 N US HWY 1
TEQUESTA, FL 33469

New Mailing Address:

605 NORTHLAKE BOULEVARD
NORTH PALM BEACH, FL 33408

FEI Number: 04-3721685

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRESTIGE ACCOUNTING SERVICES OF PALM BEACH
16387 75TH WAY NORTH
PALM BEACH GARDENS, FL 33418 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KANITSCH, NOEL D
Address: 620 N US HWY 1
City-St-Zip: MIAMI BEACH, FL 33469

Title: D () Delete
Name: OLOWIN, LILACLAIRE
Address: 620 N US HWY 1
City-St-Zip: MIAMI BEACH, FL 33469

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KANITSCH, NOEL D
Address: 605 NORTHLAKE BOULEVARD
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D (X) Change () Addition
Name: OLOWIN, LILACLAIRE
Address: 605 NORTHLAKE BOULEVARD
City-St-Zip: NORTH PALM BEACH, FL 33408

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: LILACLAIRE OLOWIN

D

07/12/2005

Electronic Signature of Signing Officer or Director

Date