## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000046401

City-St-Zip:

SHERMAN OAKS, CA 91403

Entity Name: BIPED INFORMATION SERVICES, INC

FILED Feb 02, 2006 Secretary of State

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Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
	TLEWOODS I N OAKS, CA S				
Current Mailing Address:			New Mailing Address:		
	TLEWOODS I N OAKS, CA S				
FEI Number	: 20-0014775	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
SUITE 228 TAMARAC The above	T MCNAB RC 3 C, FL 33321 L named entity	JS	ourpose of changing its registered	office or registered agent, or both,	
	e of Florida. 				
SIGNATUI		nic Signature of Registered Ag	 ≏nt	 Date	
Election Car		ng Trust Fund Contribution ( ).		Batto	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ( KRANTZ, A. S 3421 CASTLE SHERMAN OA	WOODS PL	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	KRANTZ, JEFI 3421 CASTLE		Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address:	VD ( KRANTZ, PAU 3421 CASTLE		Title: ( Name: Address:	) Change ()Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: A STEVEN KRANTZ PD 02/02/2006