## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000024117

MIAMI, FL 33196

City-St-Zip:

Entity Name: LIVE CLUE, INC.

FILED Feb 24, 2005 Secretary of State

| Current P                                       | rincipal Place  | of Business:                  | New Principal Place                         | New Principal Place of Business:             |  |
|---|---|-------------------------------|---|--|--|
| 10503 SW<br>MIAMI, FL                           | 161ST PLACE<br>33196                                      |                               |   |  |  |
| Current Mailing Address:                        |   |                               | New Mailing Address                         | New Mailing Address:                         |  |
| 10503 SW<br>MIAMI, FL                           | 161ST PLACE<br>33196                                      |                               |   |  |  |
| FEI Number:                                     | : 01-0806272  | FEI Number Applied For ( )    | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )            |  |
| Name and  | Address of C  | urrent Registered Agent:      | Name and Address o                          | Name and Address of New Registered Agent:    |  |
| 1840 SW 2<br>4TH FLOC<br>MIAMI, FL<br>The above | DR<br>33145 US<br>named entity s                          |                               | purpose of changing its registered          | d office or registered agent, or both,       |  |
| in the State                                    | e of Florida.   |                               |   |  |  |
| SIGNATU   |   | i- Cinneton of Devictor of A  |   | Dit  |  |
|   |   | ic Signature of Registered Ag | gent  | Date   |  |
| Election Car                                    | npaign Financing  | Trust Fund Contribution ( ).  |   |  |  |
| OFFICERS AND DIRECTORS:                         |   |                               | ADDITIONS/CHANGE                            | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:     | PSD ()<br>BOOTH, STUAR<br>10503 SW 1618<br>MIAMI, FL 3318 | ST PLACE                      | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:                     | VTD ()<br>FERREIRA, MA<br>10503 SW 1618                   |                               | Title:<br>Name:<br>Address:                 | ( ) Change ( ) Addition                      |  |

City-St-Zip:

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: STUART W BOOTH PRES 02/24/2005