2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000091110

City-St-Zip:

FILED Jul 26, 2007 Secretary of State

Entity Nar	me: LIQUIDIT	Y INVESTMENTS, INC.				
Current Principal Place of Business:			New Principal Place of Business:			
	ST MCNAB RO. AUDERDALE,					
Current Mailing Address:			New Mailing Address:			
	ST MCNAB RO. AUDERDALE,					
FEI Number:	: 03-0454354	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of	New Registered Agent:	
12050 NW	ON, LEACROF ' 10TH STREE PRINGS, FL 3:	Т				
	named entity see of Florida.	submits this statement for the	purpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUR						
		ic Signature of Registered Ag			Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ot receive the prior notic	e.		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	LIVINGSTON, E 7240 WEST MO		Title: Name: Address: City-St-Zip:	LIVINGSTON 7240 WEST I	(X) Change () Addition , BEVERLY MCNAB ROAD DERDALE, FL 33068	
Title: Name: Address: City-St-Zip:	LIVINGSTON, L 7040 WEST MO		Title: Name: Address: City-St-Zip:	LIVINGSTON 7040 WEST I	(X) Change () Addition , LEACROFT W MCNAB ROAD DERDALE, FL 33068	
Title: Name: Address: City-St-Zip:	BROWN, ANDR 7040 WEST MO		Title: Name: Address: City-St-Zip:	(() Change () Addition	
Title: Name: Address:	()	Delete	Title: Name: Address:	VP (SHAW, STEF 7240 WEST		

I hereby certify that the information supplied with this filing does not qualify 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.

Address: City-St-Zip:

NORTH LAUDERDALE, FL 33068 BR

SIGNATURE: LEACROFT LIVINGSTON. S 07/26/2007