2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2008
Secretary of State

DOCUMENT# P06000014232

Entity Name: LIPTEN AND COMPANY INC.

Current Principal Place of Business:

205 NATIONAL PL.
STE #123
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

542 ESTATES PLACE
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 20-4238206 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VP ( ) Delete
Name: KAZMAREK, MICHAEL
Address: 205 NATIONAL PL. #123
City-St-Zip: LONGWOOD, FL 32750

Title: P ( ) Delete
Name: KAZMAREK, JANET
Address: 205 NATIONAL PL.#123
City-St-Zip: LONGWOOD, FL 32750

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SEC (X) Change ( ) Addition
Name: KAZMAREK, MICHAEL
Address: 205 NATIONAL PL. #123
City-St-Zip: LONGWOOD, FL 32750

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP ( ) Change (X) Addition
Name: KAZMAREK, KEVIN M
Address: 333 SWEETWATER SPRINGS RD.
City-St-Zip: DEBARY, FL 32713

Title: VP ( ) Change (X) Addition
Name: KAZMAREK, KRISTOPHER M
Address: 531 TIBERON COVE
City-St-Zip: LONGWOOD, FL 32713

Title: VP ( ) Change (X) Addition
Name: KAZMAREK, JASON B
Address: 15 LARKSPUR LN.
City-St-Zip: DEBARY, FL 32713

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.

SIGNATURE: JANET KAZMAREK PRES 04/03/2008

Electronic Signature of Signing Officer or Director — Date