

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000129072

Entity Name: LEVINSON SALES INC

FILED
Apr 02, 2007
Secretary of State

Current Principal Place of Business:

3020 NE 32 AVE
#1514
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

4293 S. MAGNOLIA CIRCLE
DELRAY BEACH, FL 33445

Current Mailing Address:

3020 NE 32 AVE
#1514
FORT LAUDERDALE, FL 33308

New Mailing Address:

4293 S. MAGNOLIA CIRCLE
DELRAY BEACH, FL 33445

FEI Number: 20-5699562

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVINSON, STUART D
3020 NE 32 AVE
#1514
FORT LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

LEVINSON, STUART D
4293 S. MAGNOLIA CIRCLE
DELRAY BEACH, FL 33445 US

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:

04/02/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEVINSON, STUART D
Address: 3020 NE 32 AVE #1514
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEVINSON, STUART D
Address: 4293 S. MAGNOLIA CIRCLE
City-St-Zip: DELRAY BEACH, FL 33445

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.

SIGNATURE: STUART D LEVINSON

P

04/02/2007

Electronic Signature of Signing Officer or Director

Date