2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000102822

Entity Name: THRIFT ADDICTION, INC.

FILED Jan 16, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5381 BLUEBERRY HILL AVE 1041 N STATE ROAD 7 LAKE WORTH, FL 33463 MARGATE, FL 33063

Current Mailing Address: New Mailing Address:

5381 BLUEBERRY HILL AVE 1041 N STATE ROAD 7 LAKE WORTH, FL 33463 MARGATE, FL 33063

FEI Number: 22-3968670 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 US RIZZI, VICTOR 1041 N STATE ROAD 7 MARGATE, FL 33063 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: VICTOR RIZZI 01/16/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PD () Delete Title: P/S (X) Change () Addition RIZZI, VICTOR T Name: RIZZI, VICTOR T 5381 BLUEBERRY HILL AVE Address: 1041 N STATE ROAD 7 LAKE WORTH, FL 33463 City-St-Zip: MARGATE, FL 33063

Title: SD () Delete Title: VP/T (X) Change () Addition
Name: BERG_SHARON M KARLS Name: KARLSBERG_SHARON M

 Name:
 BERG, SHARON M KARLS
 Name:
 KARLSBERG, SHARON M

 Address:
 5381 BLUEBERRY HILL AVE
 Address:
 1041 N STATE ROAD 7

 City-St-Zip:
 LAKE WORTH, FL 33463
 City-St-Zip:
 MARGATE, FL 33063

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: VICTOR RIZZI P 01/16/2008