2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000012703

Entity Name: LIPSTICK CHRONICLEZ INC.

Apr 21, 2010 Secretary of State

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

401 EAST LAS OLAS STE 1400 6574 NORTH STATE ROAD 7 FORT LAUDERDALE, FL 33301

SUITE 126

COCONUT CREEK, FL 33073

Current Mailing Address: New Mailing Address:

401 EAST LAS OLAS STE 1400 6574 NORTH STATE ROAD 7 FORT LAUDERDALE, FL 33301

SUITE 126

COCONUT CREEK, FL 33073

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

ROSARIO, CHRISTINA MOSKOWITZ, NEAL 401 EAST LAS OLAS STE 1400 6574 NORTH STATE ROAD 7

FORT LAUDERDALE, FL 33301 US SUITE 126

COCONUT CREEK, FL 33073 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: NEAL MOSKOWITZ 04/21/2010

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

Name: MOSKOWITZ, NEAL PRES

6574 NORTH STATE ROAD 7 SUITE 126 Address:

City-St-Zip: COCONUT CREEK, FL 33073

Title: SEC

MOSKOWITZ, NEAL SEC Name:

6574 NORTH STATE ROAD 7 SUITE 126 Address:

COCONUT CREEK, FL 33073 City-St-Zip:

Title: TRES

MOSKOWITZ, NEAL TRES Name:

6574 NORTH STATE ROAD 7 SUITE 126 Address:

City-St-Zip: COCONUT CREEK, FL 33073

I hereby 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 all other like empowered.

SIGNATURE: NEAL MOSKOWITZ **PRES** 04/21/2010