

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000051564

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Entity Name:** LILLIPUT LIVING INC.

**Current Principal Place of Business:**

242 SE 2ND ST.  
CAPE CORAL, FL 33990

**New Principal Place of Business:**

**Current Mailing Address:**

242 SE 2ND ST.  
CAPE CORAL, FL 33990

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

MCDERMOTT, TERRY E  
1104 SE 46TH LN.  
CAPE CORAL, FL 33904 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ROMANOV, JOHN P  
Address: 242 SE 2ND ST.  
City-St-Zip: CAPE CORAL, FL 33990

Title: VP  
Name: ROMANOV, JASON W  
Address: 242 SE 2 ND ST.  
City-St-Zip: CAPE CORAL, FL 33990

Title: SEC  
Name: MCDERMOTT, TERRY E  
Address: 1104 SE 46TH LN.  
City-St-Zip: CAPE CORAL, FL 33904

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: JOHN ROMANOV

MR.

04/28/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date