

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000023058

FILED  
Sep 03, 2008  
Secretary of State

Entity Name: FLICKER FINANCIAL CORP.

## Current Principal Place of Business:

99 SE MIZNER BLVD.  
#831  
BOCA RATON, FL 33432

## New Principal Place of Business:

55 N.E. 5TH AVENUE  
SUITE 501  
BOCA RATON, FL 334324093 US

## Current Mailing Address:

99 SE MIZNER BLVD.  
#831  
BOCA RATON, FL 33432

## New Mailing Address:

55 N.E. 5TH AVENUE  
SUITE 501  
BOCA RATON, FL 334324093 US

FEI Number: 65-0819112

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FLICKER, MARK  
99 SE MIZNER BLVD.  
#831  
BOCA RATON, FL 33432 US

## Name and Address of New Registered Agent:

MONIQUE TRONCONE, CPA P.A.  
55 N.E. 5TH AVENUE  
SUITE 501  
BOCA RATON, FL 334324093 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: MONIQUE TRONCONE, CPA

09/03/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: FLICKER, MARK  
Address: 99 SE MIZNER BLVD.#831  
City-St-Zip: BOCA RATON, FL 33432

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: FLICKER, MARK  
Address: 24 W. RAILROAD AVE, PMB # 145  
City-St-Zip: TENAFLY, NJ 07670 US

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: MARK FLICKER

PD

09/03/2008

Electronic Signature of Signing Officer or Director

Date