# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# P98000036238

**Entity Name:** LIPMAN CAPITAL, INC.

**Current Principal Place of Business:**

5901 SW 74 STREET, SUITE 304
MIAMI, FL 33143

**New Principal Place of Business:**

5915 PONCE DE LEON BLVD.
44
CORAL GABLES, FL 33146

**Current Mailing Address:**

5901 SW 74 STREET, SUITE 304
MIAMI, FL 33143

**New Mailing Address:**

5915 PONCE DE LEON BLVD.
44
CORAL GABLES, FL 33146

**FEI Number: 65-0828868** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

LIPMAN, DAVID M
5901 SW 74 STREET, SUITE 304
MIAMI, FL 33143 US

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

LIPMAN, DAVID M
5915 PONCE DE LEON BLVD.
44
CORAL GABLES, FL 33146 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: ______________________ 05/01/2006
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: PTD ( ) Delete
Name: LIPMAN, DAVID M
Address: 5901 SW 74 STREET, SUITE 304
City-St-Zip: MIAMI, FL 33143

Title: VPSD ( ) Delete
Name: LIPMAN, BARBARA S
Address: 6055 SW 118 STREET
City-St-Zip: MIAMI, FL 33156

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PTD (X) Change ( ) Addition
Name: LIPMAN, DAVID M
Address: 5915 PONCE DE LEON BLVD., SUITE 44
City-St-Zip: CORAL GABLES, FL 33146

Title: VPSD (X) Change ( ) Addition
Name: LIPMAN, BARBARA S
Address: 3309 DEVON COURT
City-St-Zip: MIAMI, FL 33131

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: DAVID M. LIPMAN MGR 05/01/2006
Electronic Signature of Signing Officer or Director Date