2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED Apr 27, 2005 08:00 AM Secretary of State **DOCUMENT # P99000070498** PIPPAROO INC. Principal Place of Business Mailing Address 8135-A SEVERN DRIVE 8135-A SEVERN DRIVE BOCA RATON, FL 33433 BOCA RATON, FL 33433 No Chg-P 01052005 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0940153 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GOODMAN, RONALD DO NOT WRITE 8135-A SEVERN DRIVE BOCA RATON, FL 33433 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent Signature, typed or printed name of registered agent and title if applicable, (NOTE, Registered Agont signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Added to Fees FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. 10. OFFICERS AND DIRECTORS TITLE MANAF EVANGELISTA, PHILIPPA STREET ADDRESS 8135 SEVEN DRIVE NORTH CITY-ST-ZIP BOCA RATON, FL 33433 _U00000334214 /27/05-80034-013 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7/P TITLE NAME STREET ADDRESS 12. I hereby certify that the information supplied with this filling does indicated on this report or supplemental report is true and accur of the corporation or the receiver or there empowered to execu-changed, or on an attachment with an address, with all other like of qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information the and that my signature shall have the same legal effect as if made under oath, that I am an officer or director withis report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

ME OF SIGNING OFFICER OR DIRECTOR

Caytime Phone #