2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

Feb 01, 2007 08:00 AM **Secretary of State** DOCUMENT # P99000070970 1. Entity Name KARÉN L. LIEBERMAN, P.A. Principal Place of Business Mailing Address 133 LAUREL ROAD 133 LAUREL ROAD HOLLYWOOD, FL 33021 HOLLYWOOD, FL 33021 No Chg-P CR2E034 (11/05) 01302007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0939770 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent DO NOT WRITE LIEBERMAN, KAREN 133 LAUREL RD HOLLYWOOD, FL 33021 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. Signature, typed or printed name of registered agent and site if applicable (NOTE, Registered Agent signature required when reinstating) DATE **\$5.00** May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 U000000616258 Trust Fund Contribution. Added to Fees 02/07/07-80019-014 150.00 OFFICERS AND DIRECTORS 10. TITLE LIEBERMAN, KAREN L NAME 133 LAUREL ROAD STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33021 IIILE MAME STRLLI ADDRESS CHY-SI-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE IITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an atlachment with an address, with all other like empowered.

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED