

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000083423

FILED  
Apr 17, 2009  
Secretary of State

Entity Name: MARMORSTEIN FAMILY ENTERPRISES, INC.

**Current Principal Place of Business:**

8720 S.W. 84TH STREET  
MIAMI, FL 33173

**New Principal Place of Business:**

**Current Mailing Address:**

8518 MENTOR AVENUE  
SUITE A  
MENTOR, OH 44060

**New Mailing Address:**

FEI Number: 65-0702682      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

RASCO, REININGER, PEREZ & ESQUENAZ, PL-  
283 CATALONIA AVE  
SECOND FLOOR  
CORAL GARDENS, FL 33134 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: DAVIS, AMY  
Address: 145 ORDALE BLVD  
City-St-Zip: PITTSBURGH, PA 15228 US

Title: VP ( ) Delete  
Name: MARMORSTEIN, MICHAEL  
Address: 29765 BRIARBANK CT  
City-St-Zip: SOUTHFIELD, MI 48034 US

Title: SEC ( ) Delete  
Name: MARMORSTEIN, DANNY  
Address: 8720 S.W. 84TH STREET  
City-St-Zip: MIAMI, FL 33173 US

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOHN G. GALLOVIC

CPA

04/17/2009

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

\_\_\_\_\_ Date