

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000093810

Entity Name: THE HUSKY GANG, INC.

FILED
Jan 11, 2008
Secretary of State

Current Principal Place of Business:

256 NE 85 ST
MIAMI, FL 33138

New Principal Place of Business:

Current Mailing Address:

256 NE 85 ST
MIAMI, FL 33138

New Mailing Address:

FEI Number: 65-0888197

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SATZ, PHYLLIS R
256 NE 85 ST
MIAMI, FL 33138 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: D () Delete
Name: SATZ, PHYLLIS R
Address: 256 NE 85TH ST
City-St-Zip: MIAMI, FL 33138

Title: AD () Delete
Name: SATZ, BARRY
Address: 256 NE 85TH ST
City-St-Zip: MIAMI, FL 33138

Title: S () Delete
Name: DAVIDSON, ESTHER
Address: 3591 FLAMINGO DR.
City-St-Zip: MIAMI, FL 33140

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: PHYLLIS R. SATZ

D

01/11/2008

Electronic Signature of Signing Officer or Director

_____ Date