2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 193634

Entity Name: KAHN-CARLIN & COMPANY, INC.

FILED Jan 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3350 SOUTH DIXIE HIGHWAY MIAMI, FL 33133 **Current Mailing Address: New Mailing Address:** 3350 SOUTH DIXIE HIGHWAY MIAMI, FL 33133 FEI Number: 59-0773328 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KAHN, ALBERT KAHN, ALBERT 3350 S DIXIE HWY 3350 SOUTH DIXIE HIGHWAY MIAMI, FL 33133 MIAMI, FL 33133 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: 01/21/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition CARLIN, DONALD, Name: Name: 2 CASUARINA CONCOURSE Address: Address: City-St-Zip: MIAMI, FL 33143 City-St-Zip: SD Title: Title: () Delete () Change () Addition Name: KAHN.ALBERT. Name: 9501 S.W. 70 AVENUE Address: Address: MIAMI, FL 33156 City-St-Zip: City-St-Zip: Title: Title: () Delete SRVP () Change (X) Addition FABRY, ROY, Name: Name: 7100 SW 130 STREET Address Address: City-St-Zip: City-St-Zip: MIAMI, FL 33156 Title: () Delete Title: VΡ () Change (X) Addition TRAEGER, LAURA. Name: Name: Address: Address: 14400 SW 81 AVENUE City-St-Zip: City-St-Zip: MIAMI, FL 33158 Title: Title: SRVP () Change (X) Addition () Delete Name: Name: PARKER, MICHAEL, Address: Address: 16615 SW 82 COURT City-St-Zip: City-St-Zip: MIAMI, FL 33157 Title: () Delete Title: **EXVP** () Change (X) Addition Name: Name: WALTHER, JOHN, 10484 SW 114 TERRACE Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33176

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: LAURA TRAEGER VP 01/21/2009