2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 208142

Entity Name: KASSATLY'S, INC.

City-St-Zip: PALM BEACH, FL 33480

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
250 WOR PALM BE	TH AVE. ACH, FL 3348	04663		
Current Mailing Address:			New Mailing Address:	
250 WOR PALM BE	TH AVE. ACH, FL 3348	04663		
FEI Number	r: 59-0860279	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of (Current Registered Agent:	Name and Address o	f New Registered Agent:
250 WOR	.Y, EDWARD TH AVE ACH, FL 3348	0 US		
	e named entity te of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,
SIGNATU	IRE:			
	Electro	nic Signature of Registered Ag	ent	Date
Election Ca	mpaign Financin	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:		TORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	KASSATLY, EI 309 BARTON A	N/E	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	KASSATLY, RO 9062 LAKES B		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	P (KASSATLY, NA 9062 LAKES B) Delete	Title: Name: Address:	() Change () Addition
City-St-Zip:			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.

City-St-Zip:

SIGNATURE: EDWARD KASSATLY S 04/29/2009