2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2009
Secretary of State

DOCUMENT# 398914

Entity Name: INDUSTRY PUBLISHERS, INC.

Current Principal Place of Business:

1450 NE 123RD STREET
NORTH MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

1450 NE 123RD STREET
NORTH MIAMI, FL 33161

New Mailing Address:

FEI Number: 59-1395025 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHWARTZ, STANLEY J.
1450 NE 123RD ST.
NO. MIAMI, FL 33161 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	SCHWARTZ,STANLEY J.	
Address:	1450 NE 123RD ST.	
City-St-Zip:	N. MIAMI, FL	
Title:	V	(X) Delete
Name:	KEIGHLEY, MICHAEL	
Address:	1495 CHERRY GULCH RD	
City-St-Zip:	DURRANGO, CO 81301	
Title:	TD	( ) Delete
Name:	KATZ, HARDY	
Address:	1450 NE 123RD ST.	
City-St-Zip:	N. MIAMI, FL	
Title:	D	( ) Delete
Name:	GOODMAN, SHEILA	
Address:	1 GORVE ISLE DR	
City-St-Zip:	MIAMI, FL 33133	
Title:	EOD	(X) Delete
Name:	MELTZER, JOEL	
Address:	3575 ST GAUDENS	
City-St-Zip:	MIAMI, FL 33133	

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:		
Title:	D	(X) Change ( ) Addition
Name:	GOODMAN, SHEILA	
Address:	1 GROVE ISLE DR	
City-St-Zip:	MIAMI, FL 33133	
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: HARDY C KATZ TD 05/06/2009

Electronic Signature of Signing Officer or Director Date