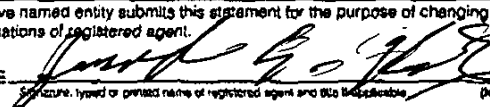
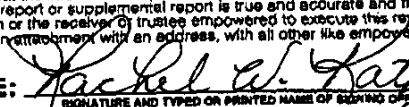


**2005 FOR PROFIT CORPORATION
REINSTATEMENT**

DOCUMENT # J35799					
1. Entity Name KATZ SPECIALTIES, INC.					
Principal Place of Business 901 LELAND HGTS BLVD LEHIGH ACRES, FL 33936 US			Mailing Address 901 LELAND HGTS BLVD LEHIGH ACRES, FL 33936 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-2736840	
5. Certificate of Statute Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent KATZ TIM P 1221 CORTEZ AVENUE LEHIGH ACRES, FL 33936				7. Name and Address of New Registered Agent Name Joseph E. Katz Street Address (P.O. Box Number is Not Acceptable) 901 W. Leeland Hgts. Blvd. City Lehigh Acres FL Zip Code 33936	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE 				DATE 6-2-05	
FILE NOW!!! FEE IS \$900.00					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD KATZ, RACHEL W. 302 N GREENWOOD AVE LEHIGH ACRES, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	S Rachel W. Katz 302 N. Greenwood Ave. Lehigh Acres, FL. 33936	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VO KATZ, JOSEPH E. 302 N GREENWOOD AVE LEHIGH, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	T Joseph E. Katz 302 N. Greenwood Ave. Lehigh Acres, FL. 33936	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	M KATZ, TIM P 1221 CORTEZ AVENUE LEHIGH ACRES, FL 33936	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	100056031611 06/10/05--01060--002 **300.00	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  DATE 6-2-05					

19272

Katz Plumbing
901 W. Leeland Heights Blvd.
Lehigh Acres, FL 33936
Phone: (239) 369-3415 or 368-3415
Fax: (239) 369-3514
katzplumbing@earthlink.net

May 06, 2005

State of Florida
Department of Corporations
PO Box 6327
Tallahassee, FL 32314

Dear Sir,

Enclosed please find my check in the amount of \$300.00 for the 2004 and 2005 annual renewal fee.

I did not receive an annual report for the 2004-2005 year. I am in poor health, and an absentee owner. Would it be possible to please, waive the ~~\$600.00~~ re-instatement fee?

If you should have any questions, please call (239) 369-3415 or (239) 369-3414.

Sincerely,
Katz Specialties, Inc.

Rachel W. Katz, President
Rachel W. Katz
(President)