## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J96429

Entity Name: ALLEN H. KATZ, P.A.

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

175 W CAMINO REAL 6720 VIALE ELIZABETH

BOCA RATON, FL 33432 DELRAY BEACH, FL 33446 US

Current Mailing Address: New Mailing Address:

13900 S JOG RD 203-276 6720 VIALE ELIZABETH

DELRAY BEACH, FL 33446 US

FEI Number: 65-0015222 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:

KATZ, ALLEN H.

13900 S JOG RD 203-276

DELRAY BEACH, FL 33446 US

HIRSCH AND COMPANY CPAS, INC.

175 W. CAMINO REAL

BOCA RATON, FL 33432 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: DAVID HIRSCH 04/21/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 ( ) Delete
 Title:
 PS
 (X) Change ( ) Addition

 Name:
 KATZ, ALLEN H
 Name:
 KATZ, DORIS

 Address:
 13900 S JOG RD 203-276
 Address:
 6720 VIALE ELIZAETH

 City-St-Zip:
 DELRAY BEACH, FL 33446
 City-St-Zip:
 DELRAY BEACH, FL 33446 US

011y-30-21p. DELIVAT BEACH, TE 33440 00

Title: PS (X) Delete Title: ( ) Change ( ) Addition
Name: KATZ DORIS Name:

 KATZ, DORIS
 Name:

 13900 S JOG RD 203-276
 Address:

 DELRAY BEACH, FL 33446
 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: DORIS KATZ PS 04/21/2009