

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L10532

FILED
Mar 24, 2009
Secretary of State

Entity Name: KASEN & BARKAN, P.A.

Current Principal Place of Business:

2600 DOUGLAS RD
904
CORAL GABLES, FL 33134 US

Current Mailing Address:

2600 DOUGLAS RD
904
CORAL GABLES, FL 33134 US

New Principal Place of Business:

2600 S. DOUGLAS RD
904
CORAL GABLES, FL 33134 US

New Mailing Address:

2600 S. DOUGLAS RD
904
CORAL GABLES, FL 33134 US

FEI Number: 65-0141404

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KASEN, MARSHALL A
2600 DOUGLAS RD
904
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

KASEN, MARSHALL A
2600 S. DOUGLAS RD
904
CORAL GABLES, FL 33134 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:

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: KASEN, MARSHALL A
Address: 2600 DOUGLAS RD, #904
City-St-Zip: CORAL GABLES, FL 33134 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: KASEN, MARSHALL A
Address: 2600 S. DOUGLAS RD, #904
City-St-Zip: CORAL GABLES, FL 33134 US

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: MARSHALL A KASEN

PRES

03/24/2009

Electronic Signature of Signing Officer or Director

Date