
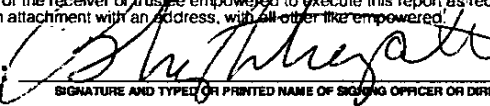


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 12, 2005 8:00 am
Secretary of State

04-12-2005 90146 007 ****70.00

DOCUMENT # N29236 1. Entity Name HANNAH KAHN POETRY FOUNDATION LTD, INC.		
Principal Place of Business 3630 BATTERSEA ROAD C/O FRED WITKOFF MIAMI, FL 33133-6805	Mailing Address 3630 BATTERSEA ROAD C/O FRED WITKOFF MIAMI, FL 33133-6805	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent WITKOFF, FRED 3630 BATTERSEA ROAD MIAMI, FL 33133		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>		
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WITKOFF, FRED 3630 BATTERSEA RD. MIAMI, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SCHWARTZ, MAGI 4970 SHERIDAN ST HOLLYWOOD, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NIGHTINGALE, BARBARA 2231 N 52ND AVE HOLLYWOOD, FL 33021	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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 617, 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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		4/6/05 954 9017/26 <small>Date Daytime Phone #</small>