2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29236

FILED May 08, 2006 Secretary of State

Entity Name: HANNAH KAHN POETRY FOUNDATION LTD, INC.

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

3630 BATTERSEA ROAD
C/O FRED WITKOFF
C/ONIGHTINGALE
MIAMI, FL 331336805
C231 N. 52ND AVE.
C/ONIGHTINGALE
HOLLYWOOD, FL 33021

Current Mailing Address: New Mailing Address:

3630 BATTERSEA ROAD 2231 N. 52ND AVE.
C/O FRED WITKOFF C/O NIGHTINGALE
MIAMI, FL 331336805 HOLLYWOOD, FL 33021

FEI Number: 65-0126998 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WITKOFF, FRED NIGHTINGALE, BARBRA 3630 BATTERSEA ROAD 2231 N. 52ND AVE.
MIAMI, FL 33133 US HOLLYWOOD, FL 33021 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: BARBRA NIGHTINGALE 05/08/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: DR (X) Change () Addition Name: WITKOFF, FRED, Name: NIGHTINGALE, BARBRA,

 Name:
 WITKOFF, FRED,
 Name:
 NIGHTINGALE, BARBRA,

 Address:
 3630 BATTERSEA RD.
 Address:
 2231 N. 52ND AVE.

 City-St-Zip:
 MIAMI, FL
 City-St-Zip:
 HOLLYWOOD, FL 33021

Title: VD () Delete Title: PRES (X) Change () Addition Name: SCHWARTZ, MAGI Name: SCHWARTZ, MAGI

Address: 4970 SHERIDAN ST Address: 4970 SHERIDAN ST
City-St-Zip: HOLLYWOOD, FL City-St-Zip: HOLLYWOOD, FL

Title: P () Delete Title: () Change () Addition

 Name:
 NIGHTINGALE, BARBARA
 Name:

 Address:
 2231 N 52ND AVE
 Address:

 City-St-Zip:
 HOLLYWOOD, FL 33021
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBRA NIGHTINGALE PRES 05/08/2006