2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005339

City-St-Zip:

BOCA RATON, FL 33496

FILED Jan 10, 2009 Secretary of State

DOCON	11	00000339		Secretary of State	
Entity Na	me: SACKITI	O YOU, INC.			
Current Principal Place of Business:			New Principal Place	of Business:	
	. 53RD STREET TON, FL 33496				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	. 53RD STREET TON, FL 33496				
FEI Number	: 65-0783285	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
BOCA RA	.53RD STREET TON, FL 33496	S US	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATUI	RE:				
	Electron	ic Signature of Registered Ag	ent	Date	
OFFICER	S AND DIRECT	rors:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () MARCUS, JOSH 3938 N.W. 53RI BOCA RATON, F	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () MARCUS, SHEL 3938 N.W. 53RI BOCA RATON, F	O STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D () MARCUS, LARR 3938 N.W. 53RI		Title: Name: Address:	() Change () Addition	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: SHELLEY MARCUS D 01/10/2009