

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003188

FILED  
Apr 24, 2009  
Secretary of State

Entity Name: DOUGLAS GARDENS THRIFT SHOP, INC.

## Current Principal Place of Business:

5713 N.W. 27TH AVENUE  
MIAMI, FL 33142

## New Principal Place of Business:

## Current Mailing Address:

5713 N.W. 27TH AVENUE  
MIAMI, FL 33142

## New Mailing Address:

FEI Number: 65-0856154

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CYPEN, STEPHEN H ESQ.  
777 ARTHUR GODFREY RD.  
PALM BEACH GARDENS, FL 334100099 US

## Name and Address of New Registered Agent:

CYPEN, STEPHEN H ESQ.  
777 ARTHUR GODFREY RD.  
MIAMI BEACH, FL 33140 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:

04/24/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BECK, HAROLD  
Address: 700 CORAL WAY  
City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete  
Name: MARTIN, LEO  
Address: 255 NW 25 ST.  
City-St-Zip: MIAMI, FL 33127

Title: TD ( ) Delete  
Name: UNGER, ARTHUR  
Address: 1001 BRICKELL BAY DR 1400  
City-St-Zip: MIAMI, FL 33131

Title: SD ( ) Delete  
Name: KATZIN, ALFRED  
Address: 13215 LAKESIDE TERR  
City-St-Zip: COOPER CITY, FL 33330

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: UNGER, ARTHUR  
Address: 1001 BRICKELL BAY DR SUITE 1400  
City-St-Zip: MIAMI, FL 33131

Title: SD (X) Change ( ) Addition  
Name: KATZIN, FRED  
Address: 13215 LAKESIDE TERR  
City-St-Zip: COOPER CITY, FL 33330

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.

SIGNATURE: HAYDEE PABON

AM

04/24/2009

Electronic Signature of Signing Officer or Director

Date