## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000125164

Entity Name: KANTER CORPORATION OF FLORIDA, INC.

FILED Jan 14, 2009 Secretary of State

Littly Na	ille. KANTER	CORPORATION OF FLORIDA	4, INC.			
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
4770 BISCAYNE BLVD.			505 S FLA	505 S FLAGLER DRIVE SUITE 900 WEST PALM BEACH, FL 33401 US		
SUITE 1150 MIAMI, FL 33137 US						
Current Mailing Address:				New Mailing Address:		
C/O JENN	- IIFER LYNCH 5	05 S. FLAGLER DRIVE				
SUITE 900	)	334015948 US				
	•					
FEI Number	: 31-0550418	FEI Number Applied For ( )	FEI Number Not App	licable ( ) C	ertificate of Status Desired ( )	
Name and	l Address of C	urrent Registered Agent:	Name and	Address of Nev	v Registered Agent:	
515 E. PAI	ECT AGENTS, RK AVE. SSEE, FL 3230					
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing i	its registered offic	ee or registered agent, or both,	
SIGNATUI	RE:					
	Electron	ic Signature of Registered Age	ent		Date	
Election Car	mpaign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	PD () KANTER, JOHN 4770 BISCAYNI MIAMI, FL 3313	E BLVD #1150	Title: Name: Address: City-St-Zip:	NEWMYER, ARTH 2355 MARSEILLE		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	DST () CH KANTER, JOHN E 505 S FLAGLER D WEST PALM BEAG		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	DVP ( ) CH KANTER, HARRY : 505 S FLAGLER D WEST PALM BEAG	RIVE SUITE 900	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D () CH KANTER, HILLARY 505 S FLAGLER D WEST PALM BEAR	RIVE SUITE 900	

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: JOHN E.KANTER S 01/14/2009