

10/15/2015 02:35 FAX

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FILED
Jun 21, 2006 8:00 am
Secretary of State

05-02-2006 90220 041 ***150.00

**2006 FOR PROFIT CORPORATION
 ANNUAL REPORT (AR)**

DOCUMENT # P05000032896 1. Entity Name KITTY TAIL, INC.																																																																																																					
Principal Place of Business 4710 N.W. BOCA RATON BLVD. #104 BOCA RATON FL 33431 US			Mailing Address 4710 N.W. BOCA RATON BLVD. #104 BOCA RATON FL 33431 US																																																																																																		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																																																																																																		
City & State			City & State																																																																																																		
Zip		Country		4. FEI Number 20-2446259																																																																																																	
5. Certificate of Status Desired ☐ \$0.75 Additional Fee Required				1st MCORE CR2E034 (10/05)																																																																																																	
6. Name and Address of Current Registered Agent LEGAL ZOOM NEVADA, INC. 44 W. FLAGLER ST., SUITE 675 MIAMI FL 33130				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																																																																																	
8. The above named entity submits in a 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 Signature of person named as registered agent and the individual																																																																																																					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing \$5.00 May Be Total Fund Contribution ☐ Added to Fees																																																																																																		
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3">10. OFFICERS AND DIRECTORS</th> <th colspan="3">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</th> </tr> </thead> <tbody> <tr> <td style="width:15%;">TITLE</td> <td style="width:55%;">NAME</td> <td style="width:30%;">☐ Delete</td> <td style="width:15%;">TITLE</td> <td style="width:55%;">NAME</td> <td style="width:30%;">☐ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>4710 N.W. BOCA RATON BLVD. #104</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td>BOCA RATON FL 33431</td> <td></td> <td>CITY-STATE-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>PRES</td> <td>☐ Delete</td> <td>TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td>PRAVDA, DENISE</td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4710 N.W. BOCA RATON BLVD. #104</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td>BOCA RATON FL 33431</td> <td></td> <td>CITY-STATE-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ Delete</td> <td>TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td></td> <td></td> <td>CITY-STATE-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ Delete</td> <td>TITLE</td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-STATE-ZIP</td> <td></td> <td></td> <td>CITY-STATE-ZIP</td> <td></td> <td></td> </tr> </tbody> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS	4710 N.W. BOCA RATON BLVD. #104		STREET ADDRESS			CITY-STATE-ZIP	BOCA RATON FL 33431		CITY-STATE-ZIP			TITLE	PRES	☐ Delete	TITLE		☐ Change ☐ Addition	NAME	PRAVDA, DENISE		NAME			STREET ADDRESS	4710 N.W. BOCA RATON BLVD. #104		STREET ADDRESS			CITY-STATE-ZIP	BOCA RATON FL 33431		CITY-STATE-ZIP			TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-STATE-ZIP			CITY-STATE-ZIP			TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-STATE-ZIP			CITY-STATE-ZIP		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 118, 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 607, 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: <u>Susan B. Jacobson (President)</u> 4/22/06 501/912-0190 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																																																																																					

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1st MCORE CR2E034 (10/05)

4. FEI Number **20-2446259** Applies For No: Applicable

5. Certificate of Status Desired ☐ \$0.75 Additional Fee Required

LEGAL ZOOM NEVADA, INC.
 44 W. FLAGLER ST., SUITE 675
 MIAMI FL 33130

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

SIGNATURE
Signature of person named as registered agent and the individual
FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State
 9. Election Campaign Financing **\$5.00** May Be
 Total Fund Contribution ☐ Added to Fees

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SIGNATURE: Susan B. Jacobson (President) 4/22/06 501/912-0190
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1.D

Susan B. Jacobson

Mar 19 06 06:45p

ATTACHMENT



Department of the Treasury
Internal Revenue Service
PHILADELPHIA PA 19255-0038

Date of this notice: JUNE 5, 2006
Taxpayer Identification Number: 20-2446259
Form: Tax Period:

For assistance you may
call us at:
1-800-829-0115

000454.291601.0002.001 1 AT 0.308 370



KITTY TAIL INC
4710 NW BOCA RATON BLVD 104
BOCA RATON FL 33431-4861296

000454

NOTICE OF ACCEPTANCE AS AN S CORPORATION

~~WE HAVE ACCEPTED YOUR ELECTION TO BE TREATED AS AN S CORPORATION BEGINNING MAR. 2, 2005. YOUR ACCOUNTING PERIOD WILL END IN DECEMBER.~~

~~WE WOULD ALSO LIKE TO TAKE THIS OPPORTUNITY TO INFORM YOU OF YOUR TAX OBLIGATIONS RELATED TO THE PAYMENT OF COMPENSATION TO SHAREHOLDER EMPLOYEES OF S CORPORATIONS.~~

~~WHEN A SHAREHOLDER-EMPLOYEE OF AN S CORPORATION PROVIDES SERVICES TO THE S CORPORATION, REASONABLE COMPENSATION GENERALLY NEEDS TO BE PAID. THIS COMPENSATION IS SUBJECT TO EMPLOYMENT TAXES.~~

~~TAX PRACTITIONERS AND SUBCHAPTER S SHAREHOLDERS NEED TO BE AWARE THAT REVENUE RULING 74-44 STATES THAT THE INTERNAL REVENUE SERVICE (IRS) WILL RE-CHARACTERIZE SMALL BUSINESS CORPORATION DIVIDENDS PAID TO SHAREHOLDERS AS SALARY WHEN SUCH DIVIDENDS ARE PAID TO THE SHAREHOLDERS IN LIEU OF REASONABLE COMPENSATION FOR SERVICES.~~

~~THE IRS MAY ALSO RE-CHARACTERIZE DISTRIBUTIONS OTHER THAN DIVIDEND DISTRIBUTIONS AS SALARY. THIS POSITION HAS BEEN SUPPORTED IN SEVERAL RECENT COURT DECISIONS.~~

~~IF YOU HAVE ANY QUESTIONS ABOUT THIS NOTICE OR THE ACTION WE HAVE TAKEN, PLEASE CALL US AT THE TELEPHONE NUMBER LISTED ABOVE. IF YOU PREFER, YOU MAY WRITE TO US AT THE ADDRESS SHOWN AT THE TOP OF THIS NOTICE. IF YOU WRITE TO US, PLEASE PROVIDE YOUR TELEPHONE NUMBER AND THE MOST CONVENIENT TIME FOR US TO CALL SO WE CAN RESOLVE YOUR INQUIRY. PLEASE RETURN THE BOTTOM PART OF THIS NOTICE TO HELP US IDENTIFY YOUR CASE.~~

RETURN THIS PART TO US WITH YOUR CHECK OR INQUIRY
YOUR TELEPHONE NUMBER BEST TIME TO CALL
() -

200621

29953-536-04795-6

INTERNAL REVENUE SERVICE
PHILADELPHIA PA 19255-0038

KITTY TAIL INC
4710 NW BOCA RATON BLVD 104
BOCA RATON FL 33431-4861296

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SB

XX

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