

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000070943

Entity Name: MSKATZ MANAGEMENT, INC.

FILED
Oct 29, 2008
Secretary of State**Current Principal Place of Business:**841 CHICKADEE DR.
PORT ORANGE, FL 32127**New Principal Place of Business:****Current Mailing Address:**841 CHICKADEE DR.
PORT ORANGE, FL 32127**New Mailing Address:**

FEI Number: 56-2593857

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:KATZ, STEVEN M
841 CHICKADEE DR.
PORT ORANGE, FL 32127 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: MR () Delete
Name: KATZ, STEVEN M
Address: 841 CHICKADEE DRIVE
City-St-Zip: PORT ORANGE, FL 32127 USTitle: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: MS () Change (X) Addition
Name: KATZ, MIRIAM F
Address: 841 CHICKADEE DRIVE
City-St-Zip: PORT ORANGE, FL 32127 47

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: STEVEN KATZ

MR

10/29/2008

Electronic Signature of Signing Officer or Director

Date