

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000002952

FILED
Apr 30, 2009
Secretary of State

Entity Name: NORMAN POPLOWITZ INC.

Current Principal Place of Business:

7070 DEL CORSO LANE
DELRAY BEACH, FL 33446

New Principal Place of Business:

208 WELLINGTON M
WEST PALM BEACH, FL 33417 US

Current Mailing Address:

7070 DEL CORSO LANE
DELRAY BEACH, FL 33446

New Mailing Address:

208 WELLINGTON M
WEST PALM BEACH, FL 33417 US

FEI Number: 20-1069929

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POPLOWITZ, NORMAN
7070 DEL CORSO LANE
DELRAY BEACH, FL 33446 US

Name and Address of New Registered Agent:

POPLOWITZ, NORMAN
208 WELLINGTON M
WEST PALM BEACH, FL 33417 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: NORMAN POPLOWITZ

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: POPLOWITZ, NORMAN
Address: 7070 DEL CORSO LANE
City-St-Zip: DELRAY BEACH, FL 33446

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: POPLOWITZ, NORMAN
Address: 208 WELLINGTON M
City-St-Zip: WEST PALM BEACH, FL 33417

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: NORMAN POPLOWITZ

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date