2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000044051

Entity Name: B. G. KATZ NURSERIES, INC.

() Delete

AFTON, ROBERT

8310 HAVERHILL EXT RD

BOYNTON BEACH, FL 33436

Title:

Name:

Address: City-St-Zip: FILED Jan 05, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 8310 HAVERHILL EXT RD 8310 HAVERHILL EXT RD BOYNTON BCH, FL 33463 US BOYNTON BEACH, FL 33463 US **Current Mailing Address: New Mailing Address:** 8310 HAVERHILL EXT RD 8310 HAVERHILL EXT RD BOYNTON BCH, FL 33463 US BOYNTON BEACH, FL 33463 US FEI Number: 65-0422927 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: KATZ, BORIS KATZ, BORIS 6021 OLD CT RD 1107 6021 OLD COURT ROAD BOCA RATON, FL 33433 US BOCA RATON, FL 33433 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: BORIS KATZ 01/05/2004 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition KATZ, BORIS Name: Name: 6021 OLD COURT RD., #1107 Address: Address: City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: Title: Title: () Delete () Change () Addition Name: KATZ, ILANA Name: 6021 OLD COURT RD, #1107 Address: Address: BOCA RATON, FL 33433 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: BORIS KATZ D 01/05/2004

() Change () Addition