

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000089728

FILED  
Feb 24, 2008  
Secretary of State

Entity Name: VEYTI HOLDING CORPORATION

**Current Principal Place of Business:**

2121 VISTA PKWY  
WEST PALM BEACH, FL 33411

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 3236  
FARMINGDALE, NY 11735

**New Mailing Address:**

FEI Number: 65-0543871

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CARY, DAVID E  
2121 VISTA PKWY  
WEST PALM BEACH, FL 33411 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPT ( ) Delete  
Name: KATZ, STANLEY  
Address: 61 EXECUTIVE DR  
City-St-Zip: FARMINGDALE, NY 11735

Title: DS ( ) Delete  
Name: CARY, DAVID E  
Address: 2121 VISTA PKWY  
City-St-Zip: WEST PALM BEACH, FL 33411

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: STANLEY M. KATZ

DPT

02/24/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date