

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000093810

1. Entity Name
THE HUSKY GANG, INC.



Principal Place of Business
256 NE 85 ST
MIAMI, FL 33138

Mailing Address
256 NE 85 ST
MIAMI, FL 33138

FILED

04 MAY 10 AM 8:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03042003 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0888197

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

SATZ, PHYLLIS R
256 NE 85 ST
MIAMI, FL 33138

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SATZ, PHYLLIS R 256 NE 85TH ST MIAMI, FL 33138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AD SATZ, BARRY 256 NE 85TH ST MIAMI, FL 33138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AD MANGIARACINA, CHRISTOPHER 256 NE 85TH ST. MIAMI, FL 33138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DAVIDSON, ESTHER 3591 FLAMINGO DR. MIAMI, FL 33140
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AD KILLISSANLEY, PETER 4305 LAKE RD. MIAMI, FL 33137
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

100037046311
05/24/04--01083--011 **160.00

100037046311
05/24/04--01083--012 **8.75

**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Phyllis R Satz Phyllis R Satz 5/10/04 (305) 754 3097