


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 07, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # S92214**

1. Entity Name  
**KATZ FAMILY CORP.**



Principal Place of Business <b>4030-C SHERIDAN ST          HOLLYWOOD, FL 33021 US</b>	Mailing Address <b>4030-C SHERIDAN ST          HOLLYWOOD, FL 33021 US</b>
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**DO NOT WRITE IN THIS SPACE**



01052004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>NOT APPLICABLE</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**KATZ, HERBERT D.  
 4030-C SHERIDAN ST  
 HOLLYWOOD, FL 33021**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

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	PDT KATZ, HERBERT D. 5633 LIVE OAK TERRACE HOLLYWOOD, FL 333126378
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD KATZ, ELEANOR M. 5633 LIVE OAK TERRACE HOLLYWOOD, FL 333126378
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KATZ, THOMAS O. 8765 HORSESHOE LANE BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE IN THIS SPACE**

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 01/07/04-80005-007 150.00

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Herbert D. Katz **HERBERT D. KATZ** 1-5-2004 924-983-039

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #