2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# S92214

Entity Name: KATZ FAMILY CORP.

FILED Oct 06, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4030-C SHERIDAN ST 2255 GLADES ROAD

HOLLYWOOD, FL 33021 US SUITE 240W

BOCA RATON, FL 33434 US

Current Mailing Address: New Mailing Address:

4030-C SHERIDAN ST 21218 ST. ANDREWS BLVD. HOLLYWOOD, FL 33021 US

#404

BOCA RATON, FL 33433 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

KATZ, HERBERT D KATZ, THOMAS O SEC 2255 GLADES ROAD 4030-C SHERIDAN ST

HOLLYWOOD, FL 33021 US SUITE 240W

BOCA RATON, FL 33431 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: THOMAS O. KATZ 10/06/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition KATZ, HERBERT D., KATZ, DANIEL W PRES Name: Name:

5633 LIVE OAK TERRACE 12914 STONEBROOK DRIVE Address: Address: City-St-Zip: HOLLYWOOD, FL 333126378 City-St-Zip: **DAVIE, FL 33330**

Title: SD Title: VP D (X) Change () Addition () Delete

Name: KATZ, ELEANOR M., Name: KATZ, ELEANOR M VP 5633 LIVE OAK TERRACE 5633 LIVE OAK TERRACE Address: Address: HOLLYWOOD, FL 333126378 HOLLYWOOD, FL 333126378 City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition () Delete SD

KATZ, THOMAS O., KATZ, THOMAS O SEC. Name: Name: 8765 HORSESHOE LANE 8765 HORSESHOE LANE Address: Address: City-St-Zip: BOCA RATON, FL 33496 City-St-Zip: BOCA RATON, FL 33496

Title: () Delete Title: VΡ () Change (X) Addition

KATZ, WALTER M VP Name: Name: Address: Address: 714 NW 101ST TERRACE City-St-Zip: City-St-Zip: PLANTATION, FL 33324

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: THOMAS O. KATZ SEC 10/06/2007