

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S92214

FILED  
Jan 07, 2011  
Secretary of State

Entity Name: KATZ FAMILY CORP.

**Current Principal Place of Business:**

2255 GLADES ROAD  
SUITE 240W  
BOCA RATON, FL 33434 US

**New Principal Place of Business:**

**Current Mailing Address:**

21218 ST. ANDREWS BLVD.  
#404  
BOCA RATON, FL 33433 US

**New Mailing Address:**

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

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

KATZ, THOMAS O SEC  
2255 GLADES ROAD  
SUITE 240W  
BOCA RATON, FL 33431 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: KATZ, DANIEL W PRES  
Address: 12914 STONEBROOK DRIVE  
City-St-Zip: DAVIE, FL 33330

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

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

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

I hereby 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 all other like empowered.

SIGNATURE: THOMAS O. KATZ

SD

01/07/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date