2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#751956

Entity Name: CATS EXCLUSIVE, INC.

FILED Feb 23, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6350 W. ATLANTIC BLVD MARGATE, FL 33063 US **Current Mailing Address: New Mailing Address:** 6350 W. ATLANTIC BLVD MARGATE, FL 33063 FEI Number: 59-2212954 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JACKSON, MARGE D 900 NW 123 DR CORAL SPRINGS, FL 33071 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition BOYCE, DAVID BOYCE, DAVID Name: Name: 10555 WHEELHOUSE CIRCLE Address: 10555 WHEELHOUSE CIRCLE Address: City-St-Zip: BOCA RATON, FL 33428 City-St-Zip: BOCA RATON, FL 33428 Title: Title: () Delete () Change () Addition Name: SCHMOLL, CAROLE Name: Address: 11450 NW 39 CT Address: CORAL SPRINGS, FL 33065 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition WEISS, FREDDA Name: Name: Address: 239 NW 41 AVE Address: City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip: Title: DP Title: () Change () Addition () Delete Name: BOYCE, KAREN Name: 10555 WHEELHOUSE CIR Address: Address: City-St-Zip: BOCA RATON, FL 33428 City-St-Zip: Title: () Delete Title: () Change () Addition SIMSON, DEBORAH Name: Name: 9040 ROYAL PALM BLVD. #510 Address: Address: City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: Title: () Delete Title: () Change () Addition JACKSON, MARGE D Name: Name: Address: 900 NW 123 DR Address: CORAL SPRINGS, FL 33071 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARGE D. JACKSON BC 02/23/2004