2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2005 8:00 am
Secretary of State
03-15-2005 90028 046 ****70.00

DOCUMENT # 751956

1. Entity Name
CATS EXCLUSIVE, INC.

Principal Place of Business	Mailing Address
6350 W. ATLANTIC BLVD MARGATE, FL 33063 US	6350 W. ATLANTIC BLVD MARGATE, FL 33063 US

03062005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2212954 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
JACKSON, MARGE D 900 NW 123 DR CORAL SPRINGS, FL 33071	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DR BOYCE, DAVID 10555 WHEELHOUSE CIRCLE BOCA RATON, FL 33428	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT MARGE JACKSON 900 N.W. 123 Drive CORAL SPRINGS, FL 33071	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV SCHMOLL, CAROLE 11450 NW 39 CT CORAL SPRINGS, FL 33065	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT DeboRAH SIMSON 9040 Royal Palm Blvd. #501 CORAL Springs, FL 33065	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT WEISS, FREDDA 239 NW 41 AVE DEERFIELD BEACH, FL 33442	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY Richard Bilello 5528 N.W. 79 WAY PARKLAND, FL 33067	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP BOYCE, KAREN 10555 WHEELHOUSE CIR. BOCA RATON, FL 33428	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	RECORDER CAROLE Schmoll 11450 N.W. 39th Ct. CORAL SPRINGS, FL 33065	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS SIMSON, DEBORAH 9040 ROYAL PALM BLVD. # 510 CORAL SPRINGS, FL 33065	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BC JACKSON, MARGE D 900 NW 123 DR CORAL SPRINGS, FL 33071	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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 617, 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: FREDDA Weiss Fredda Weiss Treasurer 3/10/05 (954) 975-8349
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #