

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 30, 2009
Secretary of State**

DOCUMENT# N99000000419

Entity Name: C.A.T.S., INC.

Current Principal Place of Business:

931 DOVE AVE
MIAMI SPRINGS, FL 33166

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 661160
MIAMI SPRINGS, FL 33266

New Mailing Address:

FEI Number: 65-0873756 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVER, LANEY
931 DOVE AVENUE
MIAMI SPRINGS, FL 33166 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: PDTD () Delete
Name: SILVER, LANEY
Address: 931 DOVE AVE
City-St-Zip: MIAMI SPRINGS, FL 33166

Title: SD () Delete
Name: EDWARDS, MYRA
Address: 1840 SW 87TH AVENUE
City-St-Zip: MIAMI, FL 33165

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LANEY SILVER

PD

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date