

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000059891

FILED
Jul 02, 2004
Secretary of State

Entity Name: KAT KARE MOTORWORKS, INC.

Current Principal Place of Business:

2200 ALHAMBRA CIRCLE
CORAL GABLES, FL 33134

New Principal Place of Business:

8060 NW 67 TH ST
MIAMI, FL 33166

Current Mailing Address:

2200 ALHAMBRA CIRCLE
CORAL GABLES, FL 33134

New Mailing Address:

8060 NW 67TH ST
MIAMI, FL 33166

FEI Number: 06-1697413

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORRES, AIDA
2200 ALHAMBRA CIRCLE
CORAL GABLES, FL 33134

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DEL VALLE, JAIME I
Address: 2200 ALHAMBRA CIRCLE
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Delete
Name: TORRES, AIDA
Address: 2200 ALHAMBRA CIRCLE
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. (X) Change () Addition
Name: DEL VALLE, JAIME I
Address: 2200 ALHAMBRA CIRCLE
City-St-Zip: CORAL GABLES, FL 33134

Title: MRS. (X) Change () Addition
Name: TORRES, AIDA
Address: 2200 ALHAMBRA CIRCLE
City-St-Zip: CORAL GABLES, FL 33134

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

SIGNATURE: JAIME I. DEL VALLE

MR.

07/02/2004

Electronic Signature of Signing Officer or Director

Date