

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000029853

FILED  
Feb 10, 2003  
Secretary of State

Entity Name: KATI KO, INC.

## Current Principal Place of Business:

1411 DELK ROAD  
LONGWOOD, FL 327792742 US

## New Principal Place of Business:

## Current Mailing Address:

1411 DECK ROAD  
LONGWOOD, FL 327792742 US

## New Mailing Address:

FEI Number: 59-3314368

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ANDERSON, KURT L  
1411 DELK ROAD  
LONGWOOD, FL 327792742 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

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: PC ( ) Delete  
Name: ANDERSON, KURT  
Address: 1411 DELK ROAD  
City-St-Zip: LONGWOOD, FL 327792742

Title: VID ( ) Delete  
Name: HOCHFELDER, STEVEN J  
Address: 1953 BRIDGE WATER DRIVE  
City-St-Zip: HEATHROW, FL 32746

Title: SID ( ) Delete  
Name: HOCHFELDER, MICHELLE  
Address: 1793 OAKBROOK DRIVE  
City-St-Zip: LONGWOOD, FL 32779

Title: TID ( ) Delete  
Name: MATELA, KRZYSZTOF  
Address: 1411 DELK ROAD  
City-St-Zip: LONGWOOD, FL 32779

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VID (X) Change ( ) Addition  
Name: HOCHFELDER, STEVEN J  
Address: 1953 BRIDGE WATER DRIVE  
City-St-Zip: HEATHROW, FL 32746

Title: SID (X) Change ( ) Addition  
Name: HOCHFELDER, MICHELLE  
Address: 1953 BRIDGEWATER DRIVE  
City-St-Zip: HEATHROW, FL 32746

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KURT L. ANDERSON

P

02/10/2003

Electronic Signature of Signing Officer or Director

Date