

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000041180 (5)
 1. Corporation Name
CATALANO AUTO SALES INC.



Principal Place of Business 455 OR 612 SEBASTIA FL 32958	Mailing Address P.O. BOX 78021 SEBASTIAN FL 32978
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1301 US 1		2a. Mailing Address P.O. Box 780201		3. Date Incorporated or Qualified 05/05/1997	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		4. FEI Number 59-336-5010	
22. City & State Sebastian, FL		27. City & State Sebastian FL		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23. Zip 32958		28. Zip 32978		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24. Country USA		29. Country USA		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent CATALANO, ORLANDO 711 SILVERTHORN CT. BAREFOOT BAY FL 32958				10. Name and Address of New Registered Agent	
81. Name Orlando Catalano		82. Street Address (P.O. Box Number is Not Acceptable) 711 Silverthorn Ct.			
83.		84. City Barefoot Bay FL			
85. Zip Code 32976					

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Orlando Catalano	1.2 NAME	
STREET ADDRESS	711 Silverthorn Ct.	1.3 STREET ADDRESS	
CITY-ST-ZIP	Barefoot Bay FL 32976	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Carol Catalano	2.2 NAME	
STREET ADDRESS	711 Silverthorn Ct.	2.3 STREET ADDRESS	
CITY-ST-ZIP	Barefoot Bay FL 32976	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TREASURER Shawn Catalano	3.2 NAME	
STREET ADDRESS	901 NW Cashew Cir	3.3 STREET ADDRESS	
CITY-ST-ZIP	Barefoot Bay FL 32976	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Secretary Kim Catalano	4.2 NAME	
STREET ADDRESS	901 NW Cashew Cir.	4.3 STREET ADDRESS	
CITY-ST-ZIP	Barefoot Bay FL 32976	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *K. Catalano* **3-31-98 561-358-6166**

CR2E034 (10/97)