FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

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Feb 11 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1997**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K99336 (5)

1. Corporation Name
CATALINA INDUSTRIES, INC.

Principal Place of Business	Mailing Address
18191 N.W. 68TH AVE. MIAMI FL 33015	18191 N.W. 68TH AVE. MIAMI FL 33015-3926

3. Date Incorporated or Qualified: **06/29/1989**
3a. Date of Last Report: **02/21/1996**

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 · Country 25	Zip 29 · Country 30

4. FEI Number: **65-0144785** ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ — **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

AILSTOCK, JANET P. E
18191 N.W. 68TH AVE
MIAMI FL 33015

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DT	☐ DELETE	1.1 TITLE	VD	☒ Change ☐ Addition
NAME	RAPPAPORT, DEAN S.		1.2 NAME	Rappaport, Dean S	
STREET ADDRESS	18191 N.W. 68TH AVE.		1.3 STREET ADDRESS	18191 NW 68th Ave	
CITY-ST-ZIP	MIAMI FL 33015		1.4 CITY-ST-ZIP	Miami FL	
TITLE	DV	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	HERSH, ROBERT		2.2 NAME		
STREET ADDRESS	18191 N.W. 68TH AVE.		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP		
TITLE	P	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	KATZ, NATHAN		3.2 NAME		
STREET ADDRESS	18191 N.W. 68TH AVE.		3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33015		3.4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	4.1 TITLE	TS	☒ Change ☐ Addition
NAME	BLUTH, THOMAS M		4.2 NAME	Bluth, Thomas M.	
STREET ADDRESS	18191 N.W. 68TH AVENUE		4.3 STREET ADDRESS	18191 N.W. 68th Ave.	
CITY-ST-ZIP	MIAMI FL		4.4 CITY-ST-ZIP	Miami FL.	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (9/96)

14. I do 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: Thomas M. Bluth 1/17/97 (305)558-4777 x531