

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F94000004957 (6)

1. Corporation Name

KAT IMPORT BROKERS, INC.



Principal Place of Business

145TH AVE. AT HOOK CREEK BLVD.
VALLEY STREAM NY 11581

Mailing Address

145TH AVE. AT HOOK CREEK BLVD.
VALLEY STREAM NY 11581

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

BEATTIE, ROSEMARY
4610 N.W. 73RD AVE.
MIAMI FL 33166

3. Date Incorporated or Qualified

09/23/1994

3a. Date of Last Report

08/23/1995

4. FEI Number

11-2695373

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

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

8840 NW 18th Terrace

83

84

City Miami

FL

85 Zip Code

33166

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

Signature typed or printed below (If change of agent, type name of new agent.)

Signature typed or printed below (If change of agent, type name of new agent.)

Signature typed or printed below (If change of agent, type name of new agent.)

12. OFFICERS AND DIRECTORS

1. TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

PD
KRETSCHMER, KLAUS
145TH AVE. AT HOOK CREEK BLVD.
VALLEY STREAM NY 11581

☐ DELETE

1. TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

V
BORNGO, JOSEPH
145TH AVE. AT HOOK CREEK BLVD.
VALLEY STREAM NY 11581

☐ DELETE

1. TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

T
RIORDON, DENNIS
145TH AVE. AT HOOK CREEK BLVD.
VALLEY STREAM NY 11581

☐ DELETE

1. TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

1. TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

1. TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition

2. NAME

3. STREET ADDRESS

4. CITY-ST-ZIP

2. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-ST-ZIP

3. TITLE

3. NAME

3. STREET ADDRESS

4. CITY-ST-ZIP

4. TITLE

4. NAME

4. STREET ADDRESS

4. CITY-ST-ZIP

5. TITLE

5. NAME

5. STREET ADDRESS

5. CITY-ST-ZIP

6. TITLE

6. NAME

6. STREET ADDRESS

6. CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/29/96

56 825 4032

CR2E034 (12/95)