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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Mar 11 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9400005728 (0)

ORGANOCAT, INCORPORATED

Ollani	NOON! INCOM CHATED										
Principal Plac	e of Business	Mailing	Address							01 010 11 10010 11	00 101 103 i
605 VIA VERO	ONA	605 VI	A VERONA								
DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 334					12			DO NOT WRITE	IN THIS	SPACE	
US		US						3. Date Incorporated or Qualified	114 11 110	01700	
								11/04/1994			
2. Principal P	lace of Business	2a. Mail	ing Address					4. FEI Number		A	pplied For
21		26						52-0915769		N	ot Applicable
Suite, Apt.	#, etc.		e, Apt. #, etc.					5. Certificate of Status Desired		-	Additional
City & Stat		27 City	& State			 					equired
23	ө	28	& State				l	Election Campaign Financing Trust Fund Contribution		•	May Be to Fees
Zip	Country	Zip	-	Cou	ıntry			8. This corporation owes or has pa			
24	25	29		30	•			Personal Property Tax due June 30. Yes No			
	9, Name and Address of Curren	t Registered	Agent		<u> </u>			10. Name and Address of New Re	gistered	Agent	
HE	TTINGER, WILLIAM P JR, PHD				81	Name					
	5 VIA VERONA			ŀ	82	Street Ac	dres	ss (P.O. Box Number is Not Acceptate	ole)		
DE	ERFIELD BEACH FL 33442			ļ							
-				- 1	63						
				İ	В4	City			FL	85 Zip	Code
44 Pureupnt	to the provisions of Sections 607 050	2 and 607 15	OB Florida Statut	es the et	DOVE	-named co	nnor	ration submits this statement for the r			ts registered
office or r	to the provisions of Sections 607,050; egistered agent, or both, in the State im familiar with, and accept the obliga	of Florida. St	uch change was	authorized	d by	the corpo	ration	n's board of directors. I hereby accep	ot the app	cointment as	registered
	im ramillar with, and accept the obliga	HIORS OF SEC	(10) 60/ 0505, FR					TINGER JO PARS.	2	- 3 - 4	95
SIGNATURE	Signature, typed or printed name of registered agei	nt and little if anoth	able (NOT	E: Registered	d Áge	nt signature rec		when reinstating)	DATE		<u> </u>
12.	OFFICERS AND	DIRECTOR		13.				ADDITIONS/CHANGES TO OFFIC	ERS AN		
TITLE	PTCD		□ DELETE	1.1 10	TLE					Change	Addition
NAME	HETTINGER, WILLIAM P JR.PI	HD		1.2 NA	AME						
STREET ADDRESS	605 VIA VERONA			1.3 ST	HEET.	address					
CITY-ST-ZIP	DEERFIELD BEACH FL		Drieve	1.4 CF		T-ZIP				Chassa	Addiso
TITLE	VSVC LI DELETE				2.1 TITLE					Change	L Addition
NAME	HETTINGER, ALICE M			2.2 NA							
STREET ADDRESS	605 VIA VERONA					ADDRESS					
CITY-ST-ZIP TITLE	DEERFIELD BEACH FL		☐ DELETÉ	2, 4 CI 3.1 TIT		I - ZIP				Change	Addition
NAME	HETTINGER, SCOTT			3.2 NA							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
STREET ADDRESS	605 VIA VERONA					ADDRESS					
CITY-ST-ZIP	DEERFIELD BEACH FL			3.4. CI		- 1					
TITLE	D DELETE			4.1 TITLE				-	Change	Addition	
NAME	Inserra, diana l			4. 2 N	AME	1					
STREET ADDRESS	605 VIA VERONA			4.3 ST	REET.	ADDRESS					
CITY-ST-ZIP	DEERFIELD BEACH FL			4.4 CI1	TY-\$1	r-zip					
TITLE			DELETE	5.1 TiT						Change	Addition
NAME	D. HETTINGER, WIL GOSVIA VERONI DENTIELU BEAU	4inm 1	· <u> </u>	5.2 NA	ME			•			
STREET ADDRESS	405VIAVGRENI	4		5.3 ST	REET	ADDRESS		÷			
CITY-ST-ZIP	DELAFIELD BEAG	:H,FL		5.4 CI1	TY - \$1	T- ZIP		<u> </u>			
TITLE			DELETE	6.1 TIT	TLE			 		Change	☐ Addition
NAME				6.2 NA	ME						
STREET ADDRESS				6.3 ST	REET	ADDRESS					

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.