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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9400005728

1. Corporation Name

ORGANOCAT, INCORPORATED

01100.011							
Principal Place	of Business	Mailing Address			1 19811 1718 1811 1811		
605 VIA VERONA 605 VIA VERONA							
DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442				DO NOT WRITE IN 1		IIS SPACE	
us us					3. Date Incorporated or Qualifed		\neg
					11/04/1994		
2 Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	T Ar	oplied For
21	acc of Basilioso	26		52-0915769	N/	ot Applicable	
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			\$8.75	Additional	
22	•	27		5. Certifcate of Status Desired	Fee R	equired	
City & State	е	City & State		6. Election Campaign Financing	\$5.00	May Be	
23		28			Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Country	•	8. This corporation owes the current year		
24	25	29 30			Personal Property Tax.	□Yes	□No
	9. Name and Address of Current	Registered Agent		T	10. Name and Address of New Register	a Agent	
UCT	TINCED WILLIAM D ID DUD		81	Name			
HETTINGER, WILLIAM P JR, PHD 605 VIA VERONA			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
	RFIELD BEACH FL 33442						
DEE	HFIELD BEACH FL 33442		83				
			84	City	4 🙀	85 Zip	Code
					F		
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes, t	he abov	e-named corp the corporati	poration submits this statement for the purpose on's board of directors. I hereby accept the ap	or changing its pointment as re	s registered (
agent. I a	m familiar with, and accept the obligat	ions of Section 607.0505 Florida	Statutes	3.			•
SIGNATURE	William J- A	ellenger	//r	sides	ut 2-28 d when reinstating) DATE	-49	
	Signature, typed or printed name of registered agent		13.	nt signature require	ad when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS		ORS IN 12
12.	OFFICERS ANI	D DIRECTORS DELETE	1,1 TITLE	 -	ADDITIONS/CITATIONS TO CIT TO ENO	Change	Addition
TITLE	HETTINGER, WILLIAM P JR,PHI	_	1.2 NAME				_
NAME	605 VIA VERONA	·		T ADDRESS			1
STREET ADDRESS				ļ			į
CITY-ST-ZIP			1.4 CITY-S 2.1 TITLE	11-ZIP		Change	Addition
TITLE	_		2.2 NAME		•		_
NAME	605 VIA VERONA	112,11102111,11202111		T ADDRESS	,		
STREET ADDRESS	DEERFIELD BEACH FL						
CITY-ST-ZIP	DECRIED DEACH PE		2. 4 CITY-1 3.1 TITLE	51-ZIP		☐ Change	Addition
TITLE			3.2 NAME		-	,. — -	~ \
NAME	605 VIA VERONA	ł		T ADDRESS			1
STREET ADDRESS	DEERFIELD BEACH FL		3.4. CITY-5				
CITY-ST-ZIP TITLE	D DEEN ILLE BLACITY	☐ DELETE	4.1 TITLE	, LII		☐ Change	☐ Addition
NAME	INSERRA, DIANA L		4.2 NAME		•		
STREET ADDRESS	605 VIA VERONA			T ADDRESS			
CiTY-ST-ZIP	DEERFIELD BEACH FL		4.4 CITY-5	l l			
TITLE	D DEETH IEED DESCRIPTE	☐ DELETE	5.1 TITLE			Change	Addition
NAME	HETTINGER, WILLIAM P. I		5.2 NAME				
STREET ADDRESS	605 VIA VERONA		5.3 STREE	T ADDRESS			
CITY-ST-ZIP	DEERFIELD BEACH FL		5.4 CITY-5	ST-ZIP	•		
TITLE		☐ DELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME				
OTDEET ADDRESS	}		6.3 STREE	TADORESS		-	- 1

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, with all other like empowered.

6.4 CITY-ST-ZIP