

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State

03-25-2005 90133 011 ****50.00

DOCUMENT # L04000027030 1. Entity Name KATO HOLDINGS, LLC					
Principal Place of Business 100 SOUTH BIRCH ROAD #903 FT. LAUDERDALE, FL 33316 US			Mailing Address 100 SOUTH BIRCH ROAD #903 FT. LAUDERDALE, FL 33316 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 76-0755707	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent DENSON REAL ESTATE 1500 NORTH FEDERAL HIGHWAY SUITE #200 FORT LAUDERDALE, FL 33304				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2005			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM O'MALLEY, DANIEL D 100 SOUTH BIRCH ROAD #903 FORT LAUDERDALE, FL 33316	☐ Delete		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM O'MALLEY, DANIEL J 113 NURMI DRIVE FORT LAUDERDALE, FL 33301	☐ Delete		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete		☐ Change ☐ Addition	
11. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 606, Florida Statutes.					
SIGNATURE:				Date: 3/17/05 (954) 675-8729	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					