

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L85451

FILED  
Apr 28, 2003  
Secretary of State

Entity Name: KATO SALES, INC.

## Current Principal Place of Business:

% THOMAS L. SLABY  
855 FRANKLIN ST.  
ALTAMONTE SPRINGS, FL 32701

## Current Mailing Address:

% THOMAS L. SLABY  
855 FRANKLIN ST.  
ALTAMONTE SPRINGS, FL 32701

## New Principal Place of Business:

% KATHLEEN A. SLABY  
855 FRANKLIN ST.  
ALTAMONTE SPRINGS, FL 32701

## New Mailing Address:

% KATHLEEN A. SLABY  
855 FRANKLIN ST.  
ALTAMONTE SPRINGS, FL 32701

FEI Number: 59-3141176

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SLABY, THOMAS L.  
855 FRANKLIN ST.  
ALTAMONTE SPRINGS, FL 32701

## Name and Address of New Registered Agent:

SLABY, KATHLEEN A.  
855 FRANKLIN ST.  
ALTAMONTE SPRINGS, FL 32701

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.

SIGNATURE: KATHLEEN A. SLABY

04/28/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VD ( ) Delete  
Name: SLABY, KATHLEEN A.,  
Address: 855 FRANKLIN ST.  
City-St-Zip: ALTAMONTE SPRGS, FL

Title: PD (X) Delete  
Name: SLABY, THOMAS L.,  
Address: 855 FRANKLIN ST.  
City-St-Zip: ALTAMONTE SPRGS, FL

Title: VD ( ) Delete  
Name: SLABY, ANDREA J  
Address: 329 SILVER PINE DR  
City-St-Zip: LAKE MARY, FL 32746

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHLEEN A. SLABY

VD

04/28/2003

Electronic Signature of Signing Officer or Director

Date