

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **M43006** (9)

1. Corporation Name
CATALONIA PROPERTIES INC.



Principal Place of Business: **6262 BIRD ROAD SUITE 3C MIAMI FL 33155**
Mailing Address: **6262 BIRD ROAD SUITE 3C MIAMI FL 33155**

3. Date Incorporated or Qualified: **12/10/1986**
3a. Date of Last Report: **03/28/1995**
4. FEI Number: **59-2784070**
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

2. Principal Place of Business (21-24) and 2a. Mailing Address (26-30) fields with sub-headers for Suite, Apt #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent

**LOPEZ, E. DANIEL
6262 BIRD ROAD
SUITE 3C
MIAMI FL 33155**

10. Name and Address of New Registered Agent

81 Name: **Alina J. Orriols**
82 Street Address (P.O. Box Number is Not Acceptable): **6262 Bird Road Suite 3C**
83 City: **Miami**
84 State: **FL**
85 Zip Code: **33155**

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: *Alina J. Orriols* **ALINA J. ORRIOLS, Pres.** **4-10-96**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PDV	<input checked="" type="checkbox"/> DELETE
NAME	LOPEZ, E. DANIEL	
STREET ADDRESS	6262 BIRD ROAD, STE. 3C	
CITY-ST-ZIP	MIAMI FL	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	LOPEZ, E. DANIEL	
STREET ADDRESS	6262 BIRD ROAD, STE. 3C	
CITY-ST-ZIP	MIAMI FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	ORRIOLS, ALINA J	
STREET ADDRESS	6262 BIRD ROAD, STE 3C	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	PDV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	ORRIOLS, ALINA J	
3.3 STREET ADDRESS	6262 BIRD ROAD, STE 3C	
3.4 CITY-ST-ZIP	MIAMI, FL 33155	
4.1 TITLE	ST	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	HERNANDEZ, YOLANDA M	
4.3 STREET ADDRESS	6262 BIRD ROAD, STE 3C	
4.4 CITY-ST-ZIP	MIAMI, FL 33155	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 or trustee or 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: *Alina J. Orriols* **ALINA J. ORRIOLS** **4-10-96** **(305) 662-2800**

CR2E034 (12/95)