

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 08, 2003 8:00 am
Secretary of State

01-08-2003 90043 036 ***158.75

DOCUMENT # P00000030017

1. Entity Name
CATTS & ASSOCIATES, INC.



Principal Place of Business
**16776 SW 88TH STREET
MIAMI FL 33196**

Mailing Address
**16776 SW 88TH STREET
MIAMI FL 33196**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-1000329**

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required



☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~SOLANO, CAROLINA~~
~~12418 S.W. 76TH STREET~~
~~MIAMI FL 33183~~

Name **ANTONIO SOLANO**

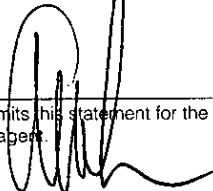
Street Address (P.O. Box Number is Not Acceptable)
12418 SW 76 ST

City **MIAMI**

FL

Zip Code **33183**

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  **ANTONIO SOLANO / PRESIDENT**

(NOTE: Registered Agent signature required when reinstating)

DATE **1/4/2003**

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **SOLANO, CAROLINA**
STREET ADDRESS **12418 S.W. 76TH STREET**
CITY-ST-ZIP **MIAMI FL 33183**

TITLE **D** ☒ Change ☐ Addition
NAME **SOLANO, CAROLINA**
STREET ADDRESS **12418 SW 76 ST**
CITY-ST-ZIP **MIAMI FL 33183**

TITLE **VD** ☐ Delete
NAME **SOLANO, ANTONIO**
STREET ADDRESS **12418 S.W. 76TH STREET**
CITY-ST-ZIP **MIAMI FL 33183**

TITLE **PRESIDENT / PDC** ☒ Change ☐ Addition
NAME **SOLANO, ANTONIO**
STREET ADDRESS **12418 SW 76 ST**
CITY-ST-ZIP **MIAMI FL 33183**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/4/2003

Date

305-588-9412

Daytime Phone #

CR2E034 (10/02)