

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2002 8:00 am
Secretary of State

04-23-2002 90360 018 ***150.00

0409802 AV

DOCUMENT # P00000034441

1. Entity Name
T-CAT INC.

Principal Place of Business

**3020 W AILEEN STREET
TAMPA FL 33607**

Mailing Address

**3020 W AILEEN STREET
TAMPA FL 33607**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

792 PEARL Cir

3. Mailing Address

742 PEARL Cir

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

BRANDON, FL

City & State

BRANDON, FL

4. Federal Number

59-3636841

Applied For

Not Applicable

Zip

33510

County

HILLS

Zip

33510

Country

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

ARNAO, ANGELA L

**3020 W AILEEN STREET
TAMPA FL 33607**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

792 PEARL Cir

City

BRANDON

FL

Zip Code

33510

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **ARNAO, ANGELA L**
STREET ADDRESS **3020 W AILEEN STREET**
CITY-ST-ZIP **TAMPA FL 33607**

TITLE **VP** ☐ Delete
NAME **ARNAO, THOMAS C JR**
STREET ADDRESS **3020 W AILEEN STREET**
CITY-ST-ZIP **TAMPA FL 33607**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Change ☐ Addition
NAME **ARNAO, ANGELA**
STREET ADDRESS **792 PEARL Cir**
CITY-ST-ZIP **BRANDON, FL 33510**

TITLE **VP** ☐ Change ☐ Addition
NAME **ARNAO, THOMAS C JR.**
STREET ADDRESS **742 PEARL Cir**
CITY-ST-ZIP **BRANDON, FL 33510**

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE **ANGELA L ARNAO** **1/30/02** **813 643-8155**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)