

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000055240

Entity Name: KATTY PULIDO INTERNATIONAL, CORP

FILED
Aug 11, 2005
Secretary of State

Current Principal Place of Business:

5440 STATE ROAD 7 SUITE 221
FORT LAUDERDALE, FL 33319

New Principal Place of Business:

16612 SADDLE CLUB RD
WESTON, FL 33326

Current Mailing Address:

5440 STATE ROAD 7 SUITE 221
FORT LAUDERDALE, FL 33319

New Mailing Address:

16612 SADDLE CLUB RD
WESTON, FL 33326

FEI Number: 65-1113858

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CADAGAN BUSINESS SOLUTIONS & ASSOCIATES INC
5440 STATE ROAD 7 SUITE 221
FORT LAUDERDALE, FL 33319 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: PULIDO, ANA T
Address: 5440 STATE ROAD 7 SUITE 221
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: VD () Delete
Name: ELIAS, ELIA
Address: 5440 STATE ROAD 7 SUITE 221
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: TD () Delete
Name: OROPEZA, CILINA
Address: 5440 STATE ROAD 7 SUITE 221
City-St-Zip: FORT LAUDERDALE, FL 33319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: PULIDO, ANA T
Address: 16612 SADDLE CLUB RD
City-St-Zip: WESTON, FL 33326

Title: VD (X) Change () Addition
Name: ELIAS, ELIA
Address: 16612 SADDLE CLUB RD
City-St-Zip: WESTON, FL 33326

Title: TD (X) Change () Addition
Name: OROPEZA, CILINA
Address: 16612 SADDLE CLUB RD
City-St-Zip: WESTON, FL 33326

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: ANA T PULIDO

PSD

08/11/2005

Electronic Signature of Signing Officer or Director

Date