

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000045524

FILED  
Jan 03, 2004  
Secretary of State

Entity Name: CONSIGNER DE CATHERINE, INC.

## Current Principal Place of Business:

9114 STATE ROAD 84  
DAVIE, FL 33324

## New Principal Place of Business:

## Current Mailing Address:

9114 STATE ROAD 84  
DAVIE, FL 33324

## New Mailing Address:

FEI Number: 04-3654134

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NOCHELLA, CATHERINE  
2365 S.W. 105TH TERRACE  
DAVIE, FL 33324 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

Election Campaign Financing Trust Fund Contribution (X).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: NOCHELLA, CATHERINE C  
Address: 10058 GRIFFIN ROAD  
City-St-Zip: COOPER CITY, FL 33328

Title: V ( ) Delete  
Name: NOCHELLA, JOSEPH G  
Address: 10058 GRIFFIN ROAD  
City-St-Zip: COOPER CITY, FL 33328

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: NOCHELLA, CATHERINE C  
Address: 9114 STATE ROAD 84  
City-St-Zip: DAVIE, FL 33324

Title: V (X) Change ( ) Addition  
Name: NOCHELLA, JOSEPH G  
Address: 9114 STATE ROAD 84  
City-St-Zip: DAVIE, FL 33324

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: CATHERINE C. NOCHELLA

P

01/03/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date