

2005 FOR PROFIT CORPORATION ANNUAL REPORT

1 of 2

DOCUMENT # P03000087187	
1. Entity Name THE KAT'S MEOW, INC.	



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 SEP 22 AM 7:54

Principal Place of Business 66 RIVER CT NAPLES, FL 34110	Mailing Address 66 RIVER CT NAPLES, FL 34110
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2. Principal Place of Business 1325 SE 23 Terrace Suite, Apt. #, etc.	3. Mailing Address 1325 SE 23 Terrace Suite, Apt. #, etc.
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09152005 Chg-P CR2E034 (10/03)

City & State Cape Coral	City & State Cape Coral
Zip 33940	Country Lee

4. FEI Number 55-0841695	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent DAVIS, KATHRYN P 66 RIVER CT NAPLES, FL 34110	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable) 1325 SE 23 Terrace	
City Cape Coral	FL Zip Code 33940

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00 Due by October 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, KATHRYN P 66 RIVER CT NAPLES, FL 34110 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1325 SE 23 Terrace Cape Coral 33940
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 900059869989 09/22/05--01034--013 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Kath Davis 9/15/05 (237) 287-1882
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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THE KAT'S MEOW , INC.
1325 SE 23 TERRACE
CAPE CORAL, FL 33990
(239) 287-1882

September 15, 2005

Division of Corporations
P. O. Box 1500
Tallahassee, FL 32302-1500

Re: Document No. P03000087187
2005 Uniform Business Report

Gentlemen:

The original Report was never received.

I called the Division of Corporations to explain the problem, I was told to write this letter explaining the situation and to send it in with the \$150.00.

Check number 1092, in the amount of \$150.00, is enclosed to cover this report.

Thank you.

Sincerely,



Kat Davis
President

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Enclosures