


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000016799	
1. Entity Name DIANA S. CATALA, P.A.	

Principal Place of Business 1402 ROYAL PALM BCH BLVD SUITE # 102 ROYAL PALM BEACH, FL 33411	Mailing Address 1402 ROYAL PALM BCH BLVD SUITE # 102 ROYAL PALM BEACH, FL 33411
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01052006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 90-0140302	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

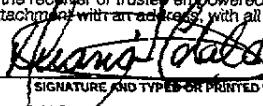
6. Name and Address of Current Registered Agent CATALA, DIANA S 13889 WELLINGTON TRACE SUITE A-2 WELLINGTON, FL 33414

**DO NOT WRITE
IN THIS SPACE**

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: 	DIANA S. CATALA	1-5-06
<small>Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	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 D	<p>DO NOT WRITE IN THIS SPACE</p> <p>1100000392608 01/24/06-80089-011 158.75</p>
NAME CATALA, DIANA S	
STREET ADDRESS 139 SEAGULL COURT	
CITY-ST-ZIP ROYAL PALM BEACH, FL 33411	
TITLE 	
NAME 	
STREET ADDRESS 	
CITY-ST-ZIP 	
TITLE 	
NAME 	
STREET ADDRESS 	
CITY-ST-ZIP 	
TITLE 	
NAME 	
STREET ADDRESS 	
CITY-ST-ZIP 	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: 	DIANA S. CATALA	1-5-06 (561) 753-7787
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		
<small>Date Daytime Phone #</small>		