2007 FOR PROFIT CORPORATION

ANNUAL REPORT FILED Apr 25, 2007 08:00 AM **DOCUMENT # P05000013984 Secretary of State** CATALDI ENTERPRISES, INC. Principal Place of Business Mailing Address 19632 EAGLES VIEW CIRCLE 19632 EAGLES VIEW CIRCLE UMATILLA, FL. 32784 UMATILLA, FL 32784 No Chg-P CR2E034 (11/05) 04202007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-2266324 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CATALDI, ANTHONY DO NOT WRITE 19632 EAGLES VIEW CIRCLE UMATILLA, FL 32784 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** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PTD TITLE NAME CATALDI, ANTHONY STREET ADDRESS 19632 EAGLES VIEW CIRCLE CITY-ST-ZIP UMATILLA, FL 32784 U00000729891 05/08/07-80058-002 150.00 SVD TITLE CATALDI, DIANE NAME STREET ADDRESS 19632 EAGLES VIEW CIRCLE CITY-ST-ZIP UMATILLA, FL 32784 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

Anthony Catabli, President

4/23/07 352-636-1066