

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000132372

Entity Name: AMERICAN CATALIN INC.

FILED  
Apr 04, 2008  
Secretary of State

## Current Principal Place of Business:

2419 SAN LUIS RD  
HOLIDAY, FL 34691

## New Principal Place of Business:

2419 SAN LUIS RD  
HOLIDAY, FL 34691 US

## Current Mailing Address:

2419 SAN LUIS RD  
HOLIDAY, FL 34691

## New Mailing Address:

2419 SAN LUIS RD.  
HOLIDAY, FL 34691 US

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED  
1203 GOVERNOR'S SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 323012960 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: PD ( ) Delete  
Name: WEINBERG, MICHAEL  
Address: 2419 SAN LUIS RD  
City-St-Zip: OLDSMAR, FL 34677

Title: VPD ( ) Delete  
Name: WALKER, JOSHUA  
Address: 2419 SAN LUIS RD  
City-St-Zip: HOLIDAY, FL 34691

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change ( ) Addition  
Name: WALKER, JOSHUA  
Address: 2419 SAN LUIS RD  
City-St-Zip: HOLIDAY, FL 34691

Title: D (X) Change ( ) Addition  
Name: WALKER, JOSHUA  
Address: 2419 SAN LUIS RD  
City-St-Zip: HOLIDAY, FL 34691

Title: P ( ) Change (X) Addition  
Name: WEINBERG, MICHAEL  
Address: 111 WINDWARD PL  
City-St-Zip: OLDSMAR, FL 34677

Title: D ( ) Change (X) Addition  
Name: WEINBERG, MICHAEL  
Address: 111 WINDWARD PL  
City-St-Zip: OLDSMAR, FL 34677

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JOSHUA WALKER

P

04/04/2008

Electronic Signature of Signing Officer or Director

Date