2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000132391

1. Entity Name

CATALINA MARTINEZ P.A.



FILED Feb 01, 2007 08:00 AM Secretary of State

CR2E034 (11/05)

Principal Place of Business

1200 BRICKELL BAY DR SUITE 2001 MIAMI, FL 33131 Mailing Address

1200 BRICKELL BAY DR SUITE 2001 MIAMI, FL 33131



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

4. FELN	lumber	Applied For
20-	3537556	Not Applicab

5. Certificate of Status Desired See Sequired \$8.75 Additional Fee Required

SPIEGĘL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR

DO NOT WRITE IN THIS SPACE

No Chg-P

01222007

MIAMI, FL 33145			IN THIS SPACE		
	named entity submits this statement for the prions of registered agent.	urpose of changing its registere .	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if	applicable. (NOTE: Registered	Agent signature	required when reinstaling)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS		.5	
NAME STREET ADDRESS CITY-ST-ZIP	PSTD MARTINEZ, CATALINA 1200 BRICKELL BAY DR SUITE 2001 MIAMI, FL 33131		. a	• ,	000000615360 02/06/07-80069-001 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			,	IN '	THIS SPACE
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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 of the corporation or the requiver of trustee impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 of Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CATALINA MARTINEZ, PRES. 101/11/107