


***2007 FOR PROFIT CORPORATION ANNUAL REPORT**

FILED
Feb 09, 2007 8:00 am
Secretary of State

01-08-2007 90244 007 ***150.00

DOCUMENT # P06000049790			
1. Entity Name FRANK CATANIA, INC.			
Principal Place of Business 5623 15TH AVENUE WEST BRADENTON, FL 34209		Mailing Address 5623 15TH AVENUE WEST BRADENTON, FL 34209	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suits, Apt. #, etc. SAME AS ABOVE		Suits, Apt. #, etc. SAME AS ABOVE	
City & State		City & State	
Zip		Zip	
Country MANATEE		Country MANATEE	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CATANIA, JAYNE 5623 15TH AVENUE WEST BRADENTON, FL 34209		Name SAME	
		Street Address (P.O. Box Number is Not Acceptable)	
		City FL	
		Zip Code	
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 <i>No Change</i>		DATE 1/4/07	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CATANIA, FRANK 5623 15TH AVENUE WEST BRADENTON, FL 34209 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CATANIA, JAYNE 5623 15TH AVENUE WEST BRADENTON, FL 34209 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	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 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: <i>Frank Catania</i> FRANK CATANIA		DATE: 1/4/07 541 8121209 541 7841411	