

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000099474

**FILED**  
**Feb 14, 2012**  
**Secretary of State**

**Entity Name:** CATO INVESTMENTS AND ADVISORS, INC.

**Current Principal Place of Business:**

5450 LYONS ROAD  
202  
COCONUT CREEK, FL 33073

**New Principal Place of Business:**

TRUMP BUSINESS CENTER 525 S. FLAGLER DR.  
5  
WEST PALM BEACH, FL 33401 UN

**Current Mailing Address:**

POB 541283  
LAKEWORTH, FL 33454

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FALCONI, PATRICIA  
9678 WOLCOTT PLACE  
WELLINGTON, FL 33414 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

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: PATRICIA, FALCONI  
Address: P.O.BOX 541283  
City-St-Zip: LAKEWORTH, FL 33454 UN

Title: CFO  
Name: GEORGE, SORIA  
Address: P.O.BOX 211791  
City-St-Zip: ROYAL PALM BEACH, FL 33421

Title: SECT  
Name: JACKELINE, BORDA  
Address: P.O.BOX 541283  
City-St-Zip: LAKEWORTH, FL 33454 UN

I hereby 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 all other like empowered.

SIGNATURE: PATRICIA FALCONI

CEO

02/14/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date