

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN -9 AM 9:15

DOCUMENT # P94000019060 (0)

1. Corporation Name

M. & A. CATALANO, INC.

Principal Place of Business

2014 FOURTH ST
SARASOTA FL 34237

Mailing Address

2014 FOURTH ST
SARASOTA FL 34237

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/11/1994

3a. Date of Last Report

2. Principal Place of Business

21 3400 S. Tamiami Trail

2a. Mailing Address

26 3400 S. Tamiami Trail

4. FEI Number

65-0475257

Applied For

Not Applicable

Suite, Apt. #, etc.

22 301

Suite, Apt. #, etc.

27 301

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23 Sarasota, Florida

City & State

28 Sarasota, Florida

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

24 34239

Country

25 USA

Zip

29 34239

Country

30 USA

8. This corporation has liability for intangible tax under S. 193.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

JAENSCH, PETER J
2014 FOURTH ST
SARASOTA FL 34237

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

3400 S. Tamiami Trail

83

Suite 301

84

Sarasota

FL

85 Zip Code

34239

11. Pursuant to the provisions of Sections 607.0507 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, and title if applicable

DATE

Peter J. Jaensch 5/31/95

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	CATALANO, MICHELE
STREET ADDRESS	4425 ASCOT CIR S
CITY - ST - ZIP	SARASOTA FL 34235
TITLE	D
NAME	CATALANO, ANTONIETTA
STREET ADDRESS	4425 ASCOT CIR S
CITY - ST - ZIP	SARASOTA FL 34235
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, if changed, or on an attachment with the address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Chapter 190.004

5-28-95 813-366-9841