## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

5321 bunn Highway

Country

82

**83** City

DOCUMENT # P95000027261 (3)

Gunn Highway

Country U.S.A.

RYDBERG & GOLDSTEIN, P.A. 500 E. KENNEDY BLVD.

9. Name and Address of Current Registered Agent

KITTY CITY, INC.

Principal Place of Business

2. Principal Place of Business

SUITE 200 TAMPA FL 33602 Mailing Address

4431 GUNN HIGHWAY TAMPA FL 33624 115

City & State

4431 GUNN HIGHWAY TAMPA FL 33624-4731 US

2a. Mailing Address

City & State

## FILED May 12 1997 8:00am Secretary of State

	3. Date Incorporated or Qualified 04/06/1995		te of Last Report	
wau	4. FEI Number 59-3306677	-1	Applied For Not Applicable	
iwng-	Certificate of Status Desired		\$8.75 Additional Fee Required	
	Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees	
H	8. This corporation has liability for in Florida Statutes	Yes [	No	
Name	10. Name and Address of New Reg	Jistered A	agent	
Street Addre	ss (P.O. Box Number is Not Acceptab	le)		

Zip Code

85

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	Signalur And or printed name of registered agreet and the it applicative	(Ng)	Inthia	1 Duncas 1 04/28/97	<b>/</b> 				
12.	OFFICERS AND DIRECTORS	1/1	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12				
TITLE	<b>PSTD</b> DELET	E	1.1 TOLE	Change	Addition				
NAME	DUNCAN, CYNTHIA L.		1.2 NAME						
STREET ADDRESS	4431 GUNN HIGHWAY		1.3 STREET ADDRESS						
CITY-ST-ZIP	TAMPA FL		1.4 CiTY-ST-ZiP						
TITLE	☐ DELE	E	2.1 TITLE	Change	Addition				
NAME			2.2 NAME						
STREET ADDRESS			2.3 STREET ADDRESS						
CITY-ST-ZIP			2.4 CITY-ST-ZIP	·					
TITLE	DELET	E	3.1 TITLE	Change	Addition				
NAME .			3.2 NAME						
STREET ADDRESS			3.3 STREET ADDRESS						
CITY-ST-ZIP			3.4. CITY - \$1 - ZIP		- 1				
TITLE	DELFT	E	4.1 70115	Change	Addition				
NAME			4.2 NAME						
STREET ADDRESS			4.3 STREET ADDRESS						
CITY-ST-ZIP			4.4 CITY - \$1 - ZIP						
TITLE	DELET	E	5.1 TITLE	☐ Change	Addition				
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET ADDRESS						
CITY-ST-ZIP			5.4 CITY - ST - ZIP		1				
TITLE	DELET	E	6.1 TITLE	☐ Change	Addition				
NAME			6.2 NAME		Ì				
STREET ADDRESS			6.3 STREET ADDRESS						
CITY-ST-ZIP			64 CHY-ST-ZIP						

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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