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

**PROFIT CORPORATION** ANNUAL REPORT

**1998** 

CITY-\$T-ZIP

Block 12 or Block 13 if changed, or on an attachment with an address



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

FILED

Jul 08 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** P95000055370 (7)

CATU INTERNATIONAL, INC

Principal Place of Business Mailing Address 8862 SW 6TH LANE 8862 SW 6TH LANE MIAMI FL 33174 MIAMI FL 33174 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/18/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 65-0593725 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SMITH & HIATT, P.A. 2400 E. COMMERCIAL BLVD., STE 600 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33301 83 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 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, typod or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change Addition DELETE 1.1 TITLE TITLE 1.2 NAME NAME FRANCO DE SA. RUI **8862 SW 6TH LANE** 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33174 1.4 CITY-ST-ZIF CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE 2.2 NAME NAME FRANCO DE SA, RICARDO 2.3 STREET ADDRESS **8862 SW 6TH LANE** STREET ADDRESS 2. 4 CITY - ST - ZIP MIAMI FL 33174 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME **CAMARA, HERALDO** 3.2 NAME STREET ADDRESS **8862 SW 6TH LANE** 3.3 STREET ADDRESS MIAMI FL 33174 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE DELETE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP ☐ Change Addition ☐ DELETÉ 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY-ST-ZIP 14. I 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

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