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

**PROFIT CORPORATION ANNUAL REPORT** 

1**9**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P96000017634 (2)

KATTOL	JRA & ASSOCIATES, INC.				<u> </u>
Principal Place	of Business	Mailing Address			i <b>o din origi</b> a (1114 <b>din</b> 1 <b>70</b> 1
•		_			
		ONE S OCEAN BLVD SUITE 212			
BOCA RATON FL 33432		BOCA RATON FL 33432		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				02/23/1996	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0648615	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State	<del></del>	<u> </u>	Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	7 <sub>(p)</sub>	Country	8. This corporation owes or has paid the curre	
24	25	29	30	· · · · · · · · · · · · · · · · · · ·	Yes No
	9. Name and Address of Curre		100	10. Name and Address of New Registered A	
KATTOURA, HIND			81 Name		
7482 COURTYARD RUN EAST			82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
	CA RATON FL 33433		Sireet Addit	ess (r.O. Box Multiber is Mot Acceptable)	
	577 FB 11 577 FE 55 155		83		
		Z)	<b>84</b> City		85 Zip Code
		//		FL	'
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 and to the purpose of changing its registered and to the statement of the statement for the purpose of changing its registered and to the statement for the purpose of changing its registered and to the statement for the purpose of changing its registered and to the statement for the purpose of changing its registered and to the statement for the purpose of changing its registered and to the statement for the purpose of changing its registered and to the statement for the purpose of changing its registered and to the statement for the purpose of changing its registered and to the statement for the purpose of changing its registered and to the statement for the purpose of changing its registered and to the statement for the purpose of changing its registered and to the statement for the purpose of changing its registered and to the statement for the purpose of changing its registered and to the statement for the purpose of changing its registered and the statement for the purpose of changing its registered and the statement for the purpose of changing its registered and the statement for the purpose of changing its registered and the statement for the purpose of changing its registered and the statement for the purpose of changing its registered and the statement for the purpose of changing its registered and the statement for the purpose of changing its registered and the statement for the purpose of changing its registered and the statement for the					
11. Pursuant to the provisions of Sp0 page 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 troop 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 Socion 607,0505, Florida Statutes.					
SIGNATURE	NAGOXOVI			4-15-	71
	Signature, typical or painted marile of registered an		It : Hegistered Agent signature require	ud when reinstating) DATE	
12.		ID DIRECTORS  DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND	Change Addition
NAME	D WATTOURA HIND	L-1 DECEME	12 NAME	'	
STREET ADDRESS	KATTOURA, HIND 7482 COURTYARD RUN EAS	т	1.3 STREET ADDRESS		
	BOCA RATON FL 33433	11	<b>!</b>		
CITY-ST-ZIP TITLE	DOCK NATON FE 33433	DELETE	1.4 CHY-ST-ZIP 2.1 TITLE		☐ Change ☐ Addition
NAME		<u> </u>	2.2 NAME	•	
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		l
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		l
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME	•	
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP	-		5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6 4 CITY - ST - ZIP		

14. Thereby 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 suppliemental annual report is 100 and an annual report of indicated on this annual report of suppliemental annual report 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 receiptor flustee 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, onch are already under with an address.

415-36

**FILED** 

Apr 24 1998 8:00am

Secretary of State