

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000037051

FILED  
Jan 04, 2005  
Secretary of State

Entity Name: CASSATT ENTERPRISES, INC.

## Current Principal Place of Business:

135 CHILEAN AVENUE  
PALM BEACH, FL 33480

## New Principal Place of Business:

## Current Mailing Address:

C/O STUART HAFT, ESQ  
P O BOX 431  
PALM BCH, FL 33480

## New Mailing Address:

FEI Number: 65-0668727

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STUART J HAFT  
C/O ALLEY, MAASS, ROGERS & LINDSAY, P.A.  
321 ROYAL POINCIANA PLAZA  
PALM BEACH, FL 33480 US

## Name and Address of New Registered Agent:

HAFT, STUART J ESQ  
C/O ALLEY, MAASS, ROGERS & LINDSAY, P.A.  
321 ROYAL POINCIANA PLAZA  
PALM BEACH, FL 33480 US

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: STUART J. HAFT ESQ

01/04/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete  
Name: JAMES, MADELEINE  
Address: 135 CHILEAN AVE  
City-St-Zip: PALM BEACH, FL 33480

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MADELEINE JAMES

P

01/04/2005

Electronic Signature of Signing Officer or Director

Date