

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

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Kathleen Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

99 JUL 19 AM 9:26

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # PA9700005444
 1. Corporation Name
Funeraria La Catolica, Inc

Principal Place of Business Mailing Address
6871 SW 40th 6555 NW 36th
Miami FL 33155 300-1
Miami FL 33166

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29
25	30

3. Date incorporated or Qualified
6-19-97

4. FEI Number 65-0815386 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name DELA Kennedy

82 Street Address (P.O. Box Members Not Acceptable) 6555 NW 36th 300-1

83

84 City Miami FL 85 Zip Code 33166

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] DATE 6/25/99

12. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> DELETE
NAME	<u>Khairi, S Rafay</u>
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

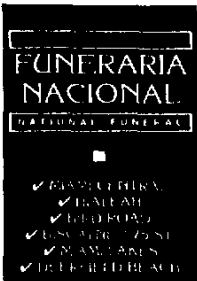
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<u>HASIN ZABIDA</u>
1.3 STREET ADDRESS	<u>6555 NW 36th Ste 300-1</u>
1.4 CITY-ST-ZIP	<u>MIAMI FL 33166</u>
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 or the receiver or trustee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ZABIDA HASIN

6/25/99 305 871-1255

CR2E034 (1/198)



Management
Offices
6501 NW 36 St.
Miami, FL 33166
Tel: (305) 871-2529

Funeraria Nacional
Central
151 NW 37 Ave.,
Miami, FL 33125
Ph (305) 642-6234

Funeraria Nacional
Hialeah
198 Hialeah Dr.,
Hialeah, FL 33010
Ph (305) 863-0444

Funeraria Nacional
Sur
6871 Bird Road
Miami, FL 33155
Ph (305) 667-7484

Funeraria Nacional
NE
7550 Biscayne Blvd.,
Miami, FL 33158
Ph (305) 751-5005

Funeraria Nacional
Miami Lakes
15209 NW 60 Ave.,
Miami Lakes,
FL 33014
Ph (305) 819-1880

National Merrill
Funerals
11414 South Federal
Highway
Deerfield Beach,
FL 33414
Ph (954) 427-7557

July 13, 1999

Florida Department of State
Katherine Harris, Secretary of State
Division of Corporations
Annual Reports Section
P O Box 6327
Tallahassee, Florida 32314


Re: P97000058204 - National All Faith Funeral, Inc
P97000056465 - La Funeraria Cubana, Inc
P97000054444 - Funeraria La Catolica, Inc
V36146 - First Arabian Financial Corporation
P98000099598 - One Price Funerals, Inc
P96000005228 - Funeraria Latina Nacional, Inc
P97000091843 - Funeraria Havana, Inc
P96000021525 - Funeraria Nacional Sur Corporacion
P97000051629 - Funeral Referral Services, Inc
P96000024334 - National Merrill Funerals Corporation

Gentlemen:

I am in receipt of your letters dated July 6 and July 7th, respectively, in which you state that you received my renewals for the corporations with the \$150.00, but have not been able to file them because we were short by the \$400.00 late fee.

This letter will serve as a formal request to appeal the assessment of this penalty, due to the fact that we relied on a third party source, according to Florida Statutes, Administrative Codes, to prepare these returns, but they were never received by the accountant and he took off with all our files. I then took it upon myself, to request the forms and a gentlemen in your office by the name of Roberts or Robertson instructed me to mail them Fedex'd with a letter of explanation and use the unprinted forms he mailed me and that the penalty would be waived. As a taxpayer, and on behalf of all the above Corporations, am exercising the rights to appeal as given to taxpayers in the Statutes of the State of Florida. You can reach me at (305) 871-1255, should you require any further assistance.

Sincerely,


(Esmeralda) Delia Kennedy
For the Firm

CC: Attorney Bernard B Weksler, For the Firm