

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90090 009 ***150.00

DOCUMENT # P97000076593

1. Entity Name

KAT'S VIDEO & SPORTS CARDS, INC.



Principal Place of Business

17431 S.W. 63RD MANOR
FORT LAUDERDALE FL 33331

Mailing Address

17431 S.W. 63RD MANOR
FORT LAUDERDALE FL 33331



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0777111

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E034 (10/05)

6. Name and Address of Current Registered Agent

ROACH, JAMES SR
10802 PASO FINO DR.
LAKE WORTH FL 33467

omit

7. Name and Address of New Registered Agent

Name *James Roach Jr.*

Street Address (P.O. Box Number is Not Acceptable)

17431 S.W. 63RD MANOR

City *Southwest Ranches*

FL

Zip Code *33331*

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PTD** ☒ Delete
NAME ROACH, JAMES SR
STREET ADDRESS 10802 PASO FINO DR.
CITY-ST-ZIP LAKE WORTH FL 33467

TITLE **V** ☐ Delete
NAME ROACH, JAMES JR
STREET ADDRESS 17431 SW 63RD MANOR
CITY-ST-ZIP SOUTHWEST RANCHES FL 33331

TITLE **PTD** ☐ Delete
NAME *JAMIE BENNETT*
STREET ADDRESS *6601 S.W. 46th St #103*
CITY-ST-ZIP *DAVIE, FLA. 33314*

TITLE **VP** ☐ Delete
NAME *JENNIFER ROACH (MEYER)*
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PTD** ☐ Change ☒ Addition
NAME *JAMIE BENNETT*
STREET ADDRESS *6601 S.W. 46th St #103*
CITY-ST-ZIP *DAVIE, FLA. 33314*

TITLE **VP** ☐ Change ☒ Addition
NAME *JENNIFER (MEYER) ROACH*
STREET ADDRESS *2706 GARFIELD ST*
CITY-ST-ZIP *HOLLYWOOD, FLA. 33020*

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/13/06

Date

954-680-9133

954-321-0899

Daytime Phone #