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PROFIT CORPORATION ANNUAL REPORT

1999



DOCUMENT # P9800059271

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

May 04, 1999 8:00 am Secretary of State

05-04-1999 90030 011 ***150.00

1. Corporation KATCO I	NTERNATIONAL, INC.				 			
Principal Place	of Business	Mailing Address						
2418 HOUNDS TRAIL		2418 HOUNDS TRAIL						
PALM HARBOR		PALM HARBOR FL 34683						
					DO NOT WRITE IN TH	IS SPACE		i
					3. Date incorporated or Qualifed 07/06/1998			
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	<u> </u>	tied For	i
21		26					Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 A		i	
22		27 City & State					-	
City & State	-	. 		<u>i</u>	- 6Election Campaign Financing Trust Fund Contribution	\$5.00 N		ĺ
23	Country	28	Countr		This corporation owes the current year		,1 603	ĺ
Zip 24	25		0}	,	Personal Property Tax.	Yes \	ZNo	l
	9. Name and Address of Current		- T		10. Name and Address of New Registers	ed Agent		l
			8	1 Name				l
	s, kathryn m		8:	3 Charact Adda	ess (P.O. Box Number is Not Acceptable)			l
	HOUNDS TRAIL		84	Stieet Addit	ess (F.O. Box Number is Not Acceptable)			1
PALI	M HARBOR FL 34683		8:	3				ĺ
			_	4 0		. 85 Zip C	odo	ı
			84	4 City	F	L S ZPC	oue	ĺ
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	f Florida. Such change was aut	horized by	y the corporatio	oration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its r pointment as reg	egistered istered	
SIGNATURE								1
	Signature, typed or printed name of registered agent			ent signature required		AND DIDECTOR	20 IN 10	3
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS	Change	Addition	1
TITLE	_		1.1 TITLE			change		1
NAME			1.2 NAME					1
STREET ADDRESS 2418 HOUNDS TRAIL			1.3 STREET ADDRESS					L
CITY-ST-ZIP	PALM HARBOR FL 34683		1.4 CITY-ST-ZIP			Change	Addition	1
TITLE	I = 1		2.1 IIILE 2.2 NAME	Į.				
NAME								i
STREET ADDRESS			2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP					l
CITY-ST-ZIP TITLE			3.1 TITLE			Change	Addition	İ
NAME			3.2 NAME					
STREET ADDRESS		. →.		ET ADDRESS	والمتجالان المواد المناب المياد المناب المناسبة ويواد	2.777		
CITY-ST-ZIP			3.4. CITY-		* `			İ
TITLE			4.1 TITLE			☐ Change	☐ Addition	ĺ
NAME			4.2 NAME	E				l
STREET ADDRESS			4.3 STRE	ET ADDRESS				ĺ
CITY-ST-ZIP			4.4 CITY-	ST-ZIP				ŀ
TITLE			5.1 TITLE			Change	☐ Addition	l
NAME			5.2 NAME	:				1
STREET ADDRESS			5.3 STRE	ET ADDRESS				ĺ
CITY-ST-ZIP			5.4 CITY-				•	i
TITLE		☐ DELETE	6.1 TITLE			☐ Change	☐ Addition	ĺ
NAME			6.2 NAME	:				i

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 or the receiver or trustee 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, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP