

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000028243

FILED
Apr 30, 2008
Secretary of State

Entity Name: CATALYSIA OF AMERICA, CORP

Current Principal Place of Business:

5950 LAKEHURST DRIVE
SUITE 169
ORLANDO, FL 32819 US

New Principal Place of Business:

Current Mailing Address:

5950 LAKEHURST DRIVE
SUITE 169
ORLANDO, FL 32819 US

New Mailing Address:

FEI Number: 59-3565587 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LARSON, CAROLINE
8818 COMMODITY CIR
40
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BENI, CARLOS E
Address: 11133 ESSEX RIDGE CT.
City-St-Zip: ORLANDO, FL 32837

Title: VPD () Delete
Name: MAIA, PAULO R
Address: 3837 DOUBLE EAGLE DR. 2722
City-St-Zip: ORLANDO, FL 32837

Title: ST () Delete
Name: BEZERRA, ROSA M
Address: 5176 MILLENIA BLVD APT 202
City-St-Zip: ORLANDO, FL 32839 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: MAIA, PAULO R
Address: 2516 CLARINET DRIVE
City-St-Zip: ORLANDO, FL 32837

Title: ST (X) Change () Addition
Name: BEZERRA, ROSA M
Address: 14339 MANDOLIN DRIVE
City-St-Zip: ORLANDO, FL 32837 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CARLOS E. BENI

PD

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date