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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$54772

(6)

CATALYTIC CONNECTION, INC.

Deignalant Diam	a of D. winsans	Marillana 6 alabahan	Mailing Address			{			
Principal Place		_	Mailing Address 4705 SW 51ST BAY 6 DAME EL 20014-5500						
4705 SW 51ST	•					• •			
BAY 6 DAVIE FL 3331	4	DAVIE FL 33314-5503							
US		US			3. Date Incorporated or Qualified 05/23/1991		te of Last 24/1996		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number			Applied For
21		26	26			65-0267240		1	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional
22		27				Certificate of Status Desired	L.J	Fee F	Required
City & State	o .	City & State	City & State			6. Election Campaign Financing		\$5.00	May Be
23		28	,			Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	Country	•		8. This corporation has liability for i			s. 199.032,
24	25	29	30					No	
	9. Name and Address of Currer	nt Registered Agent		r-:		10. Name and Address of New Re	jistered /	lgent	
	INTON, GERALD		81	I Na	ame				
	1 SW 6TH ST NTATION FL 33317		82	Sti	Street Address (P.O. Box Number is Not Acceptable)				
1 20	111A11011 1 C 000 11		83		· · · · · · · · · · · · · · · · · · ·				•
			84	Ci	ty	 		85 Zir	Code
	1.0	1007 1500 5		<u> </u>			<u>FL</u>		
office or r agent. La	to the provisions of Sections 607,050 registered agent, or both, in the State im familiar with, and accept the oblig	iz and 607, 1508, Florida Statu e of Florida. Such change was ations of, Section 607,0505, Fl	tes, the abov authorized b lorida Statute	e-nai / the s.	mea corpoi corporatio	ration submits this statement for the p n's board of directors. I hereby accep	t the app	cnanging ointment a	its registered is registered
SIGNATURE									
Signature, typed or perted name of registered agent and tice diapplicable 12. OF FICERS AND DIRECTORS			(NOTE: Registered Agent signature req			when reinstaling) ADDITIONS/CHANGES TO OFFIC	DATE	DIDEOTO	D0 11 40
12.	OFFICERS AN	D DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFIC	EHS AND	Change	
	BLANTON, GERALD W	L.J bereit						L_1 change	Modition:
NAME DIRECT ADDRESS	4181 SW 6 ST		1.2 NAME	. ADDE	2000				
STREET ADDRESS	PLANTATION FL		1.3 STREET						
CITY-ST-7IP TITLE	1 DANIANON 1 E	DELETE	1.4 CiTY - 1 2 1 TITLE	1-21	······································			Change	Addition
NAME		LLD Decerte	2.2 NAME			,		crange	
STREET ADDRESS			2 3 STREET	. Anne	stee				
CITY-SI-7IP			2 4 CiTY-		· · · · · · · · · · · · · · · · · · ·				
TITLE		DELETE	31 TITLE	Ot Liv	<u> </u>			Change	Addition
NAME			32 NAME						
STREET ADDRESS			3 3 STREE	r adde	RESS				
CITY - ST - ZIP			3.4. CiTY-		1				
TOLE		☐ DELETE	4.1 TITLE		· · · · · · · · · · · · · · · · · · ·			Change	Addition
NAME			4.2 NAME					_	
STREET ADDRESS			4.3 STREE		RESS				
CITY - \$1 - ZIP			4.4 CITY-						
TITLE		DELETE	5.1 TITLE					Change	Addition
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREE	ADDF	RESS				
CITY - ST - ZIP			5.4 CITY-						
TITLE		☐ DELE1E	6.1 TITLE	:				Change	Addition
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREE	r addr	RESS				
			I						

SIGNATURE:

appears in Block 12 or Block 13 if

LO W. BLANTON

14. I do 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

954-583-4808

FILED

Jan 22 1997 8:00am

Secretary of State