

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 11, 2008 8:00 am
Secretary of State

06-11-2008 90001 005 ***150.00

DOCUMENT # S65487

1. Entity Name
CATALINA RENTAL APARTMENTS, INC.



Principal Place of Business

1908 NW 4TH AVE
SUITE 112
BOCA RATON, FL 33432

Mailing Address

1908 NW 4TH AVE
SUITE 112
BOCA RATON, FL 33432

DO NOT WRITE IN THIS SPACE



05292008 No Chg-P CR2E034 (11/05)

4. FEI Number

65-0271947

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JON & ILENE KLASFIELD
1908 NW 4TH AVE
SUITE 112
BOCA RATON, FL 33432

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IN THIS SPACE**

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
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PD
NAME KLASFELD, JON
STREET ADDRESS 1908 NW 4TH AVE., SUITE 112
CITY-ST-ZIP BOCA RATON, FL 33432

TITLE SD
NAME KLASFELD, ILENE
STREET ADDRESS 1908 NW 4TH AVE., SUITE 112
CITY-ST-ZIP BOCA RATON, FL 33432

TITLE
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CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

Date

27 May 2008 361 3685555