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PROFIT CORPORATION **ANNUAL REPORT**

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V03045

(4)

FILED Feb 18 1998 8:00am Secretary of State

Principal Place of Business KATT ENTERPRISES \$290 NICKELS BLVD BOYNTON BEACH FL 33436 US 20 NICKELS BLVD BOYNTON BEACH FL 33425 US 20 North Reach FL 33436 US 21 28 Mailing Address 22 48 FEI Number 23 5 Suite, Apt. #, etc. 24 27 City & State 25 Country 26 5 Certificate of Status Desired 27 Country 28 29 30 Forestand Contribution 29 29 30 Forestand Property Tax due June 30. SCHROEDER AND LARCHE, P.A. 2255 GLADES RD., STE 319-A BOCA RATON 33431 83 84 City Fund Country Boynton Statement for the purpose	\$8.7! Fee \$5.0 Adde current year Yes ed Agent	Applied For Not Applicable 5 Additional Required 00 May Be ed to Fees Intangible No
BOYNTON BEACH FL 33436 US BOYNTON BEACH FL 33425 US DO NOT WRITE IN TH 3. Date Incorporated or Qualified 12/30/1991 2. Principal Place of Business 26. Mailing Address 26. Suite, Apt. #, etc 27. City & State 28. City & State 29. City & State 29. City & State 29. Country 20. Country 21. Country 22. Principal Place of Business 26. Mailing Address 27. City & State 28. Mailing Address 30. Certificate of Status Desired 31. Country 32. Country 33. Date Incorporated or Qualified 12/30/1991 5. Certificate of Status Desired 4. El Number 65-03 15081 5. Certificate of Status Desired 4. Election Campaign Financing Trust Fund Contribution 4. Fin Number of Status Desired 4. Election Campaign Financing Trust Fund Contribution 4. Fin Number of Status Desired 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 4. Fin Number of Status Desired 6. Election Campaign Financing Trust Fund Contribution 6. Election Campaign Fund Fund Fund Fund Fund Fund Fund Fun	\$8.78 Fee \$5.0 Adde current year Yes ed Agent	Not Applicable 5 Additional Required 60 May Be ed to Fees Intangible No
2. Principal Place of Business 3. Principal Place of Business 4. FEI Number 65-0315081 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 7	\$8.75 Fee \$5.0 Adde current year Yes ed Agent	Not Applicable 5 Additional Required 60 May Be ed to Fees Intangible No
28. Mailing Address 26. Suite, Apt. #, etc Suite, Apt. #, etc City & State City & State Country April Country Suite, Apt. #, etc Country Suite, Apt. #, etc City & State City & State Country Suite, Apt. #, etc. City & State City & State Country Suite, Apt. #, etc. City & State City & State Country Suite, Apt. #, etc. City & State City & State Country Suite, Apt. #, etc. City & State City & State City & State Country Suite, Apt. #, etc. City & State Suite, Apt. #, etc. Suite,	\$8.75 Fee \$5.0 Adde current year Yes ed Agent	Not Applicable 5 Additional Required 60 May Be ed to Fees Intangible No
26 65-0315081 Suite, Apt. #, etc. 5. Certificate of Status Desired 22 City & State Country 28 Country 29 30 Personal Property Tax due June 30. SCHROEDER AND LARCHE, P.A. 2255 GLADES RD., STE 319-A BOCA RATON 33431 Bound April #, etc. 5. Certificate of Status Desired 5	\$8.75 Fee \$5.0 Adde current year Yes ed Agent	Not Applicable 5 Additional Required 60 May Be ed to Fees Intangible No
Suite, Apt. #, etc 22 City & State City & State Country 25 Qa	Fee \$5.0 Adde current year Yes ed Agent	Required O May Be and to Fees Intangible No
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Trust Fund Contribution Zip Country Zip Country 28 30 S. This corporation owes or has paid the resonal Property Tax due June 30. 9. Name and Address of Current Registered Agent SCHROEDER AND LARCHE, P.A. 2255 GLADES RD., STE 319-A BOCA RATON 33431 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City	Adde current year Yes ed Agent 65 Zi e of changing	ed to Fees Intangible No No
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24 25 28 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent SCHROEDER AND LARCHE, P.A. 2255 GLADES RD., STE 319-A BOCA RATON 33431 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City	Yes ed Agent 85 Zi e of changing	No No
9, Name and Address of Current Registered Agent SCHROEDER AND LARCHE, P.A. 2255 GLADES RD., STE 319-A BOCA RATON 33431 83 84 City 10, Name and Address of New Registered Name Street Address (P.O. Box Number is Not Acceptable) 83	ed Agent 85 Zi e of changing	ip Code
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44 District to the projection of Continue COV OLOO prod COV 1500 Florida Ctat the share personal assessment this section as harden the	e of changing	n ite renietered
office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE	appointment	as registered
Signature, lysed or printed warm of my stelled agreet and tre-it applicable. (NOTE: Registered Agent signature required when reinstating). DATE		
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS A		
THE T DELETE 1.1 TITLE	L Chang	e
NAME LUCAS, SHERI WINCHEST 12 NAME		
STREET ADDRESS 9290 NICKELS BLVD 1.3 STREET ADDRESS		
CITY-ST-ZIP BOYNTON BCH FL 1.4 CITY-ST-ZIP	T 05	1.4601
TITLE DP 2.1 TITLE	Chang	e L. Addition
NAME WINCHESTER, BILL R. 22 NAME		
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	L Chang	e Addition
NAME KLATT, ERNEST A. 32 NAME A4 EAST MAIN ST		
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CHY-ST-ZIP FRANKLIN NC 34.CHY-ST-ZIP THIF D DELETE 4.1THE	Chang	e Addition
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4000 AND MALE NO. 100 AND		
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COVERNI POULT		
CITY-ST-ZIP BOYNION BCH FL 54 CITY-ST-ZIP 54 CITY-ST-ZIP DELETE 61 TITLE	Chang	e Addition
NAME 62 NAME	0.m.B	
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City-St-ZiP 64 City-St-ZiP 64 City-St-ZiP 64 City-St-ZiP 16. I hereby certify that the information supplied with this filing does not gualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further	r certify that t	he 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 a 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.

GNATURE: Sull Chapter 607, Florida Statutes; and that my name appears in BNATURE: Sull Chapter 607, Florida Statutes; and that my name appears in BNATURE: Sull Chapter 607, Florida Statutes; and that my name appears in BNATURE: Sull Chapter 607, Florida Statutes; and that my name appears in BNATURE: Sull Chapter 607, Florida Statutes; and that my name appears in BNATURE: Sull Chapter 607, Florida Statutes; and that my name appears in BNATURE: Sull Chapter 607, Florida Statutes; and that my name appears in BNATURE: Sull Chapter 607, Florida Statutes; and that my name appears in BNATURE: Sull Chapter 607, Florida Statutes; and that my name appears in BNATURE: Sull Chapter 607, Florida Statutes; and that my name appears in BNATURE: Sull Chapter 607, Florida Statutes; and that my name appears in BNATURE: Sull Chapter 607, Florida Statutes; and that my name appears in BNATURE: Sull Chapter 607, Florida Statutes; and that my name appears in BNATURE: Sull Chapter 607, Florida Statutes; and that my name appears in BNATURE: Sull Chapter 607, Florida Statutes; and that my name appears in BNATURE: Sull Chapter 607, Florida Statutes; and that my name appears in BNATURE: Sull Chapter 607, Florida Statutes; and that my name appears in BNATURE: Sull Chapter 607, Florida Statutes; and that my name appears in BNATURE: Sull Chapter 607, Florida Statutes; and that my name appears in BNATURE: Sull Chapter 607, Florida Statutes; and that my name appears in BNATURE: Sull Chapter 607, Florida Statutes; and that my name appears in BNATURE: Sull Chapter 607, Florida Statutes; and that my name appears in BNATURE: Sull Chapter 6