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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **V36765**

F. CAT, INC.

Principal Place of Business Mailing Address 6229 14TH ST W 6229 14TH ST W **BRADENTON FL 34207 BRADENTON FL 34207** DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualifed 05/15/1992 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business Not Applicable 65-0338464 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 Country 8. This corporation owes the current year Intangible Zip Country Zip □No 30 Personal Property Tax. 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CANTINA, CRANK VAYN C 82 Street Address (P.O. Box Number is Not Acceptable) 6229 14TH ST W **BRADENTON FL 34207** 83 Zin Code 84 City 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 DAYNE RATANIA 2301-635TW ☐ DELETE 11 TITLE TITLE 2301-63 ST. W CATANIA, PERF 12 NAME NAME 6612 GARDEN-LAKE MAJESTIC BRAD enton, FL 34205 1.3 STREET ADDRESS STREET ADDRESS **BRADENTON FL** 1.4 CITY+ST-ZIP CITY-ST-ZIP Addition DELETE 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 33 STREET ADORESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ DELETE 4.1 TITLE ππε NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIF Change ☐ Addition DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY+ST-ZIP CITY-ST-ZIP Change Addition 61 TITLE DELETE

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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP

-

FILED

May 14, 1999 8:00 am Secretary of State

05-14-1999 90011 008 \*\*\*300.00

CR2E034