

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000115197

FILED  
Apr 19, 2005  
Secretary of State

Entity Name: THREE SISTERS CATERING CORPORATION

**Current Principal Place of Business:**

17229 NW 73 AVE  
MIAMI, FL 33015

**New Principal Place of Business:**

2544 NE 41 TERRACE  
HOMESTEAD, FL 33030

**Current Mailing Address:**

5810 SW 112 CT.  
MIAMI, FL 33173

**New Mailing Address:**

FEI Number: 01-0638014

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RAMOS-FERNANDEZ, MARILYN  
5810 SW 112 CT.  
MIAMI, FL 33173 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: VD ( ) Delete  
Name: FERNANDEZ, MARILYN  
Address: 5810 SW 112 CT.  
City-St-Zip: MIAMI, FL 33173

Title: TD ( ) Delete  
Name: FERNANDEZ, MARIO  
Address: 5810 SW 112 CT.  
City-St-Zip: MIAMI, FL 33173

Title: PD ( ) Delete  
Name: ECHEMENDIA, JOSE  
Address: 10452 SW 46 STREET  
City-St-Zip: MIAMI, FL 33165

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARILYN RAMOS FERNANDEZ

VD

04/19/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date