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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 596615

(5)

CHEFS INTERNATIONAL-PALM BEACH, INC.

FILED
Jan 22 1997 8:00am
Secretary of State

	URIT BUBUN BIRKA	BARLU 2010 II 2020 BIRN 1316

Principal Place of Business 82 BROADWAY PO BOX 1332 POINT PLEASANT BEACH NJ 08742		Maiing Address	Maining Address 62 BROADWAY PO BOX 1332 POINT PLEASANT BEACH NJ 06742-1332			1 100 101 101 101 101 101 100 100 101 102 103			
		PO BOX 1332							
US			TOTAL TELEVISION DESIGNATION CONTRACTOR			3, Date Incorporated or Qualified 11/25/1978	Date of Last Report /30/1996		
	Place of Business	2a. Mailing Addres	SS			4. FEI Number		A	pplied For
21 62 Broadway		26		22-2239649		Not Applicat			
Suite, Apt	#, etc	Suite, Apt. #, 6	ic.			5. Certificate of Status Desired			Additional lequired
City & State		City & State	****			6. Election Campaign Financing			May Be
¬ '	leasant Beach, NJ	28				Trust Fund Contribution			to Fees
Zip	Country	Zip	Co	ountry		8. This corporation has liability for	intangible	tax under	s. 199.032,
4 087		29	30				Yes [
	9. Name and Address of Curre	ent Registered Agent		1		10. Name and Address of New Re	gistered /	\gent	
	. COOKSEY			81	Name				
	BEACHLAND BOULEVARD			82	Street Add	Iress (P.O. Box Number is Not Acceptal	ole)		
VER	O BEACH FL 32963			83					
				03					
				84	City			85 Zip	Code
***************************************		*****	···· <u>·</u>			poration submits this statement for the p	FL		
SIGNATURE	Signature type for protest came of respectances. OFFICERS A	onet and other applicable	(NOTE: Registe		n: signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFIG	DATE CERS AND	DIRECTO	RS IN 12
ITLE	SD	DEL		TITLE				☐ Change	
IAME	FLETCHER, MARTIN W.		12	NAME					
TREE1 ADDRESS	62 BROADWAY		13	STREET	ADDRESS				
117 - ST - ZIP	PT. PLEASANT BCH NJ			CITY-S	T-ZIP				
ITLE	V0	☐ DFL	ETE 21	TITLE			,	Change	Additi
IAME	FLETCHER, JAMES E.			NAME					
STREET ADDRESS	2980 S.E. FALMOUTH DR. STUART FL				ADDRESS				
HTY-ST-ZIP	PD PD	DEL		TITLE	ST-ZIP	THE STATE OF THE S		Change	Addit
TTUE IAME	PAPALIA, ANTHONY C.	L., D.C.		NAME		•••		L Criange	
IANTE Dreft Address	813 W.LAUREL AVENUE		I -		ADDRESS				
OTY ST ZIP	PT.PLEASANT BCH.,N.J			. CITY-S					
TLF		DEL		TITLE	7) &H			Change	Addit
IAME				2 NAME				, ,	
TREFT ADORESS					ADDRESS				
DITY-ST-ZIP			1	CITY-S	ì				
FILE		DEL		TITLE				Change	Addit
IAME			5.2	NAME					
TREET ADDRESS			53	STREET	ADDRESS				
ity-st-zip	, . 7712			CITY - S	T-ZIP			-	
THE		DEL		TITLE	1			Change	Adoit Adoit
NAME			62	NAME					
STREET ADDRESS					ADDRESS				
CITY - \$1 - ZIP			6.4	CITY-S	T - ZIP				

14. I do hereby certify that the information supplied with this filling 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 Brock 12 or Block 13 if changed, or on an attachment with an address.

Martin W. Fletcher

January 10, 1997 908/295-0350