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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000032598 (0)

BELLE'S CATERING INC.

Principal Place of Business

Mailing Address

2736 N.W. 26TH STREET BOCA RATON FL 33434 2736 N.W. 26TH STREET BOCA RATON FL 33434-6010

## FILED May 07 1997 8:00am Secretary of State



			3. Date Incorporated or Qualified	3a. Date of Last R	eport
2. Principal Place of Business	a. Mailing Address		04/10/1996 4. FEI Number		- No -1 17
	2a. Mailing Address	A / CL	65-0717086		plied For
21 3736 N.W.36 S+ Suite, Apt #, etc	26 27 36 N.W. Suite, Apt. #, etc.	1002	62011/086	£0.75	t Applicable
22	27		5. Certificate of Status Desired	Fee Re	
City & State  23 Soc A Raton FL.  Zip Country	City & State 28 Boc A Rato	n FL.	Election Campaign Financing     Trust Fund Contribution	\$5.00 Added	
Zip Country 24 3 3 4 3 4 25 U.S.A.	Zip 33434	Country 30 U.S.A.	This corporation has fiability for Florida Statutes	intangible tax under s Yes 🔲 No	<b>19</b> 9.032,
g. Name and Address of Currer	nt Registered Agent	1 0 1 0 1 1 1 1 1	10. Name and Address of New Re		.,
AZEN, MICHAEL L		81 Name		<del></del>	<del></del>
2736 N.W. 26TH STREET		00 01	(DO D. N	.l.x	
BOCA RATON FL 33434		Street Address (P.O. Box Number is Not Acceptable)			
BOOM WHOM I'V GOTOT		83			
				·	
		84 City		FL 85 Zip	Code
11. Pursuant to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the above-named cor	rporation submits this statement for the p	surpose of changing it	s registered
office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig-	of Florida. Such change was a ations of, Section 607.0505, Flo	uthorized by the corpora rida Statutes.	ation's board of directors. I hereby accep	ot the appointment as	registered
SIGNATURE Signature, typed or printed name of registered age	ent and title if applicable (NOTE	: Registered Agent signature requ	uired when reinstating)	DATE	
12. OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTOR	S IN 12
TITLE P/V/T/S/D/C/M	DELETE	1,1 TITLE		☐ Change	Addition
NAME MICHAEL LIAZEN		1.2 NAME			
		1.2 PIANIC			
STREET ADDRESS 2736 N.W. 265+		1.3 STREET ADDRESS			
STREFT ADDRESS A736 N.W. 265+	134				
STREET ADDRESS A736 N.W. 265+	34 DELETE	1.3 STREET ADDRESS		☐ Change	☐ Addition
STREET ADDRESS   2736 N.W. 265+ CITY-ST-ZIP   Bank Raton FL. 334	34 [] DELETE	1.3 STREET ADDRESS 1.4 City - St - Zip	·	Change	Addition
STREET ADDRESS A 736 N.W. 265+  CITY-ST-ZIF BOOK Ration FL. 334  TILE	34 [] DELETE	1.3 STREET ADDRESS 1.4 City-St-Zip 2.1 Tiyle	•	☐ Change	Addition
STREET ADDRESS A 736 N.W. 265+  CITY-ST-ZIP Back Raten FL. 334  TITLE  NAME	34 [_] DELETE	1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME	•	☐ Change	Addition
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STREET ADDRESS  CITY-ST-ZIP  Back Raten FL. 334  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	DELETE	1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	*		
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