## I hereby 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 all other like empowered.

SIGNATURE: GAEL FERNANDEZ-NE	CKELMANN

Electronic Signature of Signing Officer/Director Detail

01/25/2016

SIGNATURE:	GAEL FERNANDEZ-NECKELMANN			01/25/2016
	Electronic Signature of Registered Agent			Date
Officer/Dired	ctor Detail :			
Title	PRES	Title	VP	
Name	SCHULTZ, GUILLERMO DR.	Name	FERNANDEZ-NECKELMANN, GA	EL
Address	6116 EXECUTIVE BLVD. SUITE 401	Address	2307 S DOUGLAS RD	
City-State-Zip: R	ROCKVILLE MD 20852	City-State-Zip:	SUITE 403 MIAMI FL 33145	
		City-State-Zip.	INIAMI FE 33145	
Title	SECY			
Name	CONSLA, DEBORAH A			
Address	8301 BROADWAY, SUITE 201			
City-State-Zip:	SAN ANTONIO TX 78209			

## Name and Address of Current Registered Agent:

FERNANDEZ-NECKELMANN, GAEL 2307 S DOUGLAS RD SUITE 403 MIAMI, FL 33145 US

## **Current Mailing Address:**

2307 S DOUGLAS RD SUITE 403

## FEI Number: 65-0166292

# DOCUMENT# L45433

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

# Entity Name: CATERING COORDINATION AND ADMINISTRATION, INC.

## **Current Principal Place of Business:**

2307 S DOUGLAS RD SUITE 403 MIAMI, FL 33145

MIAMI, FL 33145 US

# FILED Jan 25, 2016 Secretary of State CC1438532302

Certificate of Status Desired: No

Date