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.

PRES

SIGNATURE: SHARON TOWNSEND	

Electronic Signature of Signing Officer/Director Detail

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000053805

Entity Name: TOWNSEND AND G CATERING & EVENTS, INC.

Current Principal Place of Business:

5701 COLLINS AVE 1604 MIAMI BEACH, FL 33140

Current Mailing Address:

5701 COLLINS AVE 1604 MIAMI BEACH, FL 33140 US

FEI Number: 47-4365873

Name and Address of Current Registered Agent:

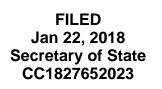
TOWNSEND, SHARON 5701 COLLINS AVENUE 1604 MIAMI BEACH, FL 33140 US

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

Officer/Director Detail :	
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Title	PRES	Title	VP			
Name	TOWNSEND, SHARON	Name	TOWNSEND, SHARON			
Address	5701 COLLINS AVENUE STE 1604	Address	5701 COLLINS AVE			
City-State-Zip:	MIAMI BEACH FL 33140		1604			
		City-State-Zip:	MIAMI BEACH FL 33140			



Certificate of Status Desired: No

01/22/2018 Date

Date