

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 560463

FILED  
Mar 30, 2003  
Secretary of State

Entity Name: HILDA CATERING SERVICES, INC.

**Current Principal Place of Business:**

960 EAST 25TH STREET  
HIALEAH, FL 33013

**New Principal Place of Business:**

**Current Mailing Address:**

14822 NW 88TH COURT  
MIAMI LAKES, FL 33018

**New Mailing Address:**

FEI Number: 59-1798121

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HERNANDEZ, HILDA C  
960 EAST 25TH ST  
HIALEAH, FL 33013 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: ST ( ) Delete  
Name: VALLE, ILEANA H  
Address: 14822 NW 88 CT  
City-St-Zip: MIAMI LAKES, FL 33018

Title: P ( ) Delete  
Name: HERNANDEZ, HILDA  
Address: 1975 W. 64TH STREET  
City-St-Zip: HIALEAH, FL 33012

Title: VP ( ) Delete  
Name: VALLE, RAUL  
Address: 14822 NW 88 CT  
City-St-Zip: MIAMI LAKES, FL 33018

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

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

Title: P (X) Change ( ) Addition  
Name: HERNANDEZ, HILDA C  
Address: 1975 W. 64TH STREET  
City-St-Zip: HIALEAH, FL 33012

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: ILEANA H VALLE

ST

03/30/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date