

LEGISLATIVE DEPARTMENT OF STATE
 Senator B. M. Martin
 Secretary of State
 DEPARTMENT OF COMMERCE

1996
DOCUMENT # 635355

SAVOIR-FARE CATERING, INC.



2011 N DIXIE (LAKE WORTH, FL 33460) P.O. BOX 6954 W PALM BCH FL 33405	2011 N DIXIE (LAKE WORTH, FL 33460) P.O. BOX 6954 W PALM BCH FL 33405
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[illegible]

9. Name and Address of Current Registered Agent:

FERNANDEZ, CARLOS
5405 MESA TRAIL
WEST PALM BEACH FL 33405

81	Name	
82	Street Address (P.O. Box Not Permitted Acceptably)	
83		
84	City	
		FL 85 Zip Code

[illegible]

1. *Journal of the American Medical Association*, 1997; 277: 1033-1037.

12
PD
FERNANDEZ, CARLOS
5405 MESA TRAIL
W PALM BCH, FL 00000
ST
HANNON, CLAUDETTE
5405 MESA TRAIL
W PALM BCH, FL 00000

[] 136.2

1. *Chlorophyll a* (mg/g)

[illegible]

DEAR

14. The following table shows the number of people who have been convicted of a crime in the United States, by age group, from 1990 to 2000. The data is presented in millions of people.

[illegible]

0678

SIGNATURE:
 SIGNATURE IS A TYPE D COPY PRINTED IMAGE OF SIGNATURE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. Name	☐ Change ☐ Addition
2. DOB	
3. Current Address	
4. Current Zip	
5. Email	☐ Change ☐ Addition
6. DOB	
7. Current Address	
8. Current Zip	
9. Email	☐ Change ☐ Addition
10. Name	
11. Current Address	
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89. Email	☐ Change ☐ Addition
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91. Current Address	
92. Current Zip	
93. Email	☐ Change ☐ Addition
94. Name	
95. Current Address	
96. Current Zip	
97. Email	☐ Change ☐ Addition
98. Name	
99. Current Address	
100. Current Zip	
101. Email	☐ Change ☐ Addition

14. I hereby certify that the information given above is true and correct, and that my signature shall have the same legal effect as if made under oath. I understand that the filing of this report is required by Chapter 607, Florida Statutes, and that my name

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/21/96 407-5866611

CR2E034 (12/95)