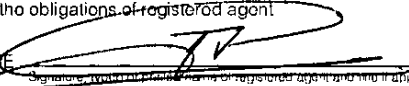


2007 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2007

FILED
Mar 19, 2007 08:00 AM
Secretary of State

DOCUMENT # A03000000088 1. Entity Name REGAL FOOD SERVICE EQUIPMENT FURNITURE & SUPPLIES, LTD					
Principal Place of Business 1731 OLD OKEECHOBEE RD. WEST PALM BEACH FL 33409 US			Mailing Address 1731 OLD OKEECHOBEE RD. WEST PALM BEACH FL 33409 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 82-0581560	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent VERGOUWEN, JOHANNES 1731 OLD OKEECHOBEE ROAD WEST PALM BEACH FL 33409				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
8. 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. I am familiar with, and accept the obligations of registered agent.				\$8.75 Additional Fee Required	
SIGNATURE  JF VERGOUWEN				DATE 1/30/07	
FILE NOW!!! Fee is \$500. *** After May 1, 2007, fee will be \$900. *** Make check payable to Florida Department of State.					
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P03000006275 REGAL FOOD SERVICE, INC. 1731 OLD OKEECHOBEE RD. WEST PALM BEACH FL 33409		STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP		000000672962 03/29/07-80010-005 500.00		
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14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes					
SIGNATURE:  JF VERGOUWEN				DATE 1/30/07 561-656-5187	



1st MOORE CR2E003 (10/06)

STAPLE CHECK HERE