2006 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 24, 2006 08:00 AM DOCUMENT # F77217 **Secretary of State** 1. Entity Name CATERING BY THE FAMILY, INC. Principal Place of Business Mailing Address 2322 W. CYPRESS STREET 2322 W. CYPRESS STREET TAMPA, FL 33609 US TAMPA, FL 33609 US 02202006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2176539 Not Applicat! \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GONZALEZ, STEVEN A. DO NOT WRITE 2322 W. CYPRESS STREET TAMPA, FL 33609 IN THIS SPACE 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. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE PD NAME GONZALEZ, STEVEN A. STREET ADDRESS 4924 BAY WAY PL WEST CITY-ST-21P TAMPA, FL 33629 TITLE NAME GUGGINO, CAROL J. (10000)0446816 STREET ADDRESS 3911 SAN MIGUEL STREET 03/08/06 80029-012 **150.00** CITY-ST-ZIP TAMPA, FL 33607 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP T(TLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the Information supplied with this thing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the Information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

M- GONZALEZ

2/21/06

FILED

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