2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # G35858

1. Entity Name
PARTY CATERERS, INC.

Principal Place of Business	Mailing Address
1150 NW 58TH AVE	1150 NW 58TH AVE
MARGATE, FL 33063 US	MARGATE, FL 33063 US

DO NOT WRITE IN THIS SPACE

02152005   No Chg-P   CR2E034 (10/03)

4. FEI Number   Applied For
59-2287208   Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

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6. Name and Address of Current Registered Agent

SCHOTT, MICHAEL
1150 NW 58TH AVE
MARGATE, FL 33063

DO NOT WRITE 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

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

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10.   OFFICERS AND DIRECTORS

TITLE	S
NAME	SCHOTT, MICHAEL
STREET ADDRESS	1150 NW 58TH AVENUE
CITY-ST-ZIP	MARGATE, FL 33063

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify 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 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: 4-7-05   954-975-7626

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #