FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Jul 21 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

	MENT # H7642 1 IZO CATERERS, INC.	(7)			A LANGKAI BAHA FERJA BAHA BANGA WANG	 Bidil bibil Diêk Bidki bibil diêk lêb)
Principal Place of Business 16365 W. DIXIE HIGHWAY NORTH MIAMI BEACH FL 33160-3708		Mailing Address 18385 W. DIXIE HIGHWAY NORTH MIAMI BEACH FL 33160-3708				
					3. Date Incorporated or Qualified 09/17/1985	3a. Date of Last Report 03/26/1996
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For	
21					59-2581305	Not Applicable
		Suite, Apt. #, etc.	C.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Required	
23		28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Count			
24	25 29		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	
<u> </u>	9. Name and Address of Curren				10. Name and Address of New Re	- · · -
KRA	IVITZ, HAROLD P.		8	1 Name		
	O W. 20TH AVENUE		ā	Stroot Ad	Idress (P.O. Box Number is Not Acceptab	do)
SUITE 223			"	3000070	ioress (1.0. box Homber is Not Accopiad	icy
	LEAH FL 33016		8	3		
			В	4 City		85 Zip Codo
				, ony		FL [10] 2.10 0000
office or r	to the provisions of Sections 607.050; egistered agent, or both, in the State im familiar with, and accept the obliga	of Florida, Such change was	s authorized b	by the carpor	orporation submits this statement for the p ation's board of directors. I hereby accep	urpose of changing its registered it the appointment as registered
	Signature, typed or printed name of registered age			gent signature rec	pured when reinstating)	DATE
12.	OFFICERS AND DIRECTORS DELETE		13. 1.1 TULE		ADDITIONS/CHANGES TO OFFIC	
TITLE	P LAMOCAIZO DEAL			- 1		L_ Change L_ Addition
NAME STORES ADDRESS	LAURENZO, BEN 16385 W. DIXIE HIGHWAY		1.2 NAM	- 1		
STREET ADDRESS	N. MIAMI BEACH FL 33160			ET ADDRESS		
CITY-ST-ZIP TITLE	V	DELETE	1.4 CITY 2.1 TITE	· 51 - ZIF		Change Addition
NAME	LAURENZO, DAVID	—	2.2 NAMI	}		
STREET ADDRESS	16385 W. DIXIE HIGHWAY			T ADDRESS		
CITY-SY-ZIP	N. MIAMI BEACH FL 33160			- ST - ZIP		
TITLE	ST	DELETE				Change Addition
NAME	LAURENZO, CAROL		3.2 NAME			
STREET ADDRESS	16385 W. DIXIE HIGHWAY	WAY 3		1 ADDRESS		
CITY-ST-ZIP	N. MIAMI BEACH FL 33160		3.4. CITY	- S1 - ZIP		
TITLE		☐ DELETE	4.1 TITLE			Change Addition
NAME			4.2 NAME			
STREET AODRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY			
TITLE		☐ DELETE	5.1 TITLE			L Change L Addition
NAME			5.2 NAME	1		
STREET ADDRESS				1 ADORESS		
CITY-ST-ZiP	IP DELETE		5.4 CHY-	ST-ZIP		Change Addition
TITLE		FT percit	6 1 10 LE	İ		ET Change ET MOUNTON
NAME Street address	;		6.2 NAME	ì		
CITY-ST-7IP	•		1	EL ADDRESS		

14. I do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119 07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under eath; 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 12 or Block 13 if changed, or on an attachment with an address. 1/14/97