

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J19067

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Entity Name:** ORLANDO KOSHER CATERING, INC.

**Current Principal Place of Business:**

10100 WEST SAMPLE ROAD  
SUITE 327  
CORAL SPRINGS, FL 33065 US

**New Principal Place of Business:**

**Current Mailing Address:**

10100 WEST SAMPLE ROAD  
SUITE 327  
CORAL SPRINGS, FL 33065 US

**New Mailing Address:**

**FEI Number:** 59-2693898

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

GREENSEID, CHARLOTTE  
9835 NW 48TH CT.  
CORAL SPRINGS, FL 33076 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GREENSEID, JONATHAN  
Address: 943 NW 124 AVE  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VP  
Name: GREENSEID, CHARLOTTE  
Address: 9835 NW 48TH CT.  
City-St-Zip: CORAL SPRINGS, FL 33076

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CHARLOTTE GREENSEID

VP

01/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date