PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION EÓR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State

DIVISION OF CORPORATIONS

K21098 DOCUMENT

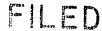
1. Corporation Name

DAVID'S CUSTOM CATERERS, INC.

Principal Place of Business Mailing Address

SIGNATURE:

SIUNATURE REQUIRED



00 JAN 12 AM 9: 35

SECRETARY OF STATE TALLAHASSEE. FLORIDA

Daytime Phone #

10/20/99

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6501 W COMMERCIAL BLVD. TAMARAC FL 33319			6501 W COMMERCIAL BLVD. TAMARAC FL 33319						
If above a	addresses are	incorrect in any way line	through incorrect in	nformation a	nd enter correction below:	NSTA	TEMENT	90	
If above addresses are incorrect in any way, line through incorre New Principal Office Address, If Applicable 3. New N				ailing Office Address, If Applicable		To Do Rusiness in Florida			
Suite, Apt. #, etc.			Suite, Apt. #	Suite, Apt. #. etc.			04/12/1988		
City & State			City & State			J. 1-E(1401110	65-0053947	Applied For Not Applicabl	_ e
Zip Country		Zip		Country 6.		CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status			
7. Names	and Street Ad	dresses of Each Officer a	and/or Director (Flo	orida nonprof	it corporations must list at le	ast 3 directors)			<u> </u>
Title(s)	Title(s) Name of Officers and/or Directors			Str Of			City / State / Zip		
PST	GOLDSTEIN, DAVID			6501 W. COMMERCIAL BLVD.		TAMARAC FL 33319			
		·					00003118 -02/01/00 ****750.00	01084001	
								LS	-
	8. Name and Address of Current Registered			1	<u> </u>	9. Name and Address of New Registered Agent			4
o. Name and Address of Current Registered Agen					Name	9. Name and	Address of New Registered	Agent	(8/8)
	KEN, CHARL W. BROWAR				Street Address (P.O. Box Number is Not Acceptable)				
SUITE 360					Suite, Apt. #, Etc.				75
PLANTATION FL 33324					City		Sta F		
10. I, bein Signature d Registered	of	e registered agent of the	above named corp	man Sar La	amiliar with and accept the c QUIRED SIGN	obligations of Sec	tion 607.0505, F.S. Date/3 人多/	<u> </u>	-
this rei	nstatement ap by the corporat	plication, the reason for c tion have been paid and t	issolution has beer he names of individ	n eliminated, duals listed o	the corporate name satisfies	s the requirement an exemption u	napter 607 or 617, F.S. I furth is of section 607.0401 or 617 nder section 119.07(3)(i), F.S	.0401, F.S., that all fees	d