

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000081692

Entity Name: D & K CATERING, LLC.

FILED
Apr 27, 2005
Secretary of State

Current Principal Place of Business:

220 SW 3RD AVE.
HALLANDALE, FL 33009 US

New Principal Place of Business:

220 SW 3RD AVENUE
HALLANDALE, FL 33009 US

Current Mailing Address:

220 SW 3RD AVE.
HALLANDALE, FL 33009 US

New Mailing Address:

220 SW 3RD AVENUE
HALLANDALE, FL 33009 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARVEZ, DEXI C
2822 PINETREE DR.
1
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

CASTILLO-PLANA, KEYLA M
220 SW 3RD AVENUE
HALLANDALE, FL 33009 US

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: KEYLA CASTILLO-PLANA

04/27/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM (X) Delete
Name: MARVEZ, DEXI C
Address: 2822 PINETREE DR. UNIT 1
City-St-Zip: MIAMI BEACH, FL 33140 US

Title: MGRM () Delete
Name: CASTILLO-PLANAS, KAYLA
Address: 173 LORE LANE PLACE
City-St-Zip: KEY LARGO, FL 33037 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: CASTILLO-PLANA, KEYLA
Address: 220 SW 3RD AVENUE
City-St-Zip: HALLANDALE, FL 33009 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KEYLA CASTILLO-PLANA

MGRM

04/27/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date