FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 12:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000001156 (8)

1. Corporation Name
CHEFS IN AMERICA FOUNDATION, INC.

Principal Place of Business	Mailing Address
9990 SW 77 AVE PH-1 MIAMI FL 33156	9990 SW 77 AVE PH-1 MIAMI FL 33156

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/03/1994
3a. Date of Last Report: N/A
4. FEI Number: 65-0536812 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business 21: 3407 TOLEDO ST. 22 Suite, Apt. #, etc.: CORAL GABLES 23 City & State: FLORIDA 24 Zip: 33134 25 Country: USA	2a. Mailing Address 26: 3407 TOLEDO ST. 27 Suite, Apt. #, etc.: CORAL GABLES. 28 City & State: FLORIDA 29 Zip: 33134 30 Country: USA.

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No SEE LETTER.

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MARCUS, PAUL 9990 SW 77 AVE PH-1 MIAMI FL 33156	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	S/D	☒ Change ☒ Addition
NAME	MARCUS, PAUL	1.2 NAME	ANGELA DURAND	
STREET ADDRESS	9990 SW 77 AVE PH-1	1.3 STREET ADDRESS	3407 TOLEDO ST	
CITY-ST-ZIP	MIAMI FL 33156	1.4 CITY-ST-ZIP	CORAL GABLES, FL 33134	
TITLE	D	2.1 TITLE	P/D	☒ Change ☐ Addition
NAME	DURAND, DANIEL	2.2 NAME	DURAND, DANIEL	
STREET ADDRESS	3407 TOLEDO ST	2.3 STREET ADDRESS	3407 TOLEDO ST	
CITY-ST-ZIP	CORAL GABLES FL 33134	2.4 CITY-ST-ZIP	CORAL GABLES, FL 33134	
TITLE	D	3.1 TITLE	D	☒ Change ☐ Addition
NAME	VAZQUEZ, ROBOERTO R	3.2 NAME	VAZQUEZ, ROBERTO R.	
STREET ADDRESS	2315 W 77 STREET	3.3 STREET ADDRESS	2315 W 77 STREET	
CITY-ST-ZIP	HIALEAH FL 33016	3.4 CITY-ST-ZIP	HIALEAH, FL 33016	
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: A Durand ANGELA DURAND 4/26/95 305-448-9279
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000E137