

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 16, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P00000033289**

1. Entity Name  
**PALM CATERERS OF BOCA RATON, INC.**



Principal Place of Business  
**300 NW 82ND AVENUE #505  
FT LAUDERDALE, FL 33324**

Mailing Address  
**300 NW 82ND AVENUE #505  
FT LAUDERDALE, FL 33324**



04122004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0998848**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**KUSNICK, HOWARD A  
300 NW 82ND AVENUE #505  
FT LAUDERDALE, FL 33324**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

U00000115720

04/16/04 00035 020 150.00

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	FRIEDMAN, STUART
STREET ADDRESS	300 NW 82ND AVENUE #505
CITY-ST-ZIP	FT LAUDERDALE, FL 33324
TITLE	ST
NAME	KAUFMAN, ERIO
STREET ADDRESS	5100 SHERIDAN ST
CITY-ST-ZIP	HOLLYWOOD, FL
TITLE	VP
NAME	HEIKEN, SCOTT
STREET ADDRESS	5100 SHRIDAN ST
CITY-ST-ZIP	HOLLYWOOD, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Stuart Friedman* **President STUART FRIEDMAN** **4/12/04** **5613471453**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #