

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 DEC 13 AM 10:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000101755

1. Corporation Name

ALEX CATERING, INC

Principal Place of Business

1333 SW 161 AVENUE
PEMBROKE PINES FL 33027

Mailing Address

1333 SW 161 AVENUE
PEMBROKE PINES FL 33027

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

10/19/2001

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PSTD	CID, ALEXANDER	1333 SW 161 AVE. PEMBROKE PINES, FL	33027
VP	MICHAEL BLOCK	3652 N ANDREWS AVE.	FT. LAUDERDALE, FL 33309

8. Name and Address of Current Registered Agent

CID, ALEXANDER
1333 SW 161 AVENUE
PEMBROKE PINES FL 33027

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

Date

REGISTERED AGENT MUST SIGN

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/5/02 954-566-7540
Date Daytime Phone #

BlockTax Accounting, Inc.

MICHAEL BLOCK, C.P.A.

3652 NORTH ANDREWS AVE

FT LAUDERDALE, FL 33309

(954) 566-7540, FAX 566-7541

<http://www.blocktax.com>

December 5, 2002

DIVISION OF CORPORATIONS

UNIFORM BUSINESS REPORT

P O BOX 1500

TALLAHASSEE, FL 32302-1500

Re: ALEX CATERING, INC.

P01000101755

2002 Annual Report (enclosed)

Enclosed please find a check for this Uniform Business Report report.

I most respectfully submit that the penalty on it should be waived. This is my forth client, out of many such reports, for which we are sure the company did not get prior Reports. Two of the companies were incorporated in error and we promptly revoked their charters, so we did not get reports for them.

I have been the CPA and an officer of this company since inception. I also served as the CPA for its owner, ALEXANDER CID, for years before this. That is why I am absolutely sure that a prior notice was not received I would, therefore, really appreciate your waiving this penalty, which I am sure is not justified.

Please note that both Mr. Cid and I run one man companies and were out of town, which delayed this response. Do not hesitate to call if you have questions.

Sincerely yours,



Michael Block