

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000101755

Entity Name: ALEX CATERING, INC

FILED
Jan 06, 2005
Secretary of State

Current Principal Place of Business:

1333 SW 161 AVENUE
PEMBROKE PINES, FL 33027

New Principal Place of Business:

14913 SW 34 STREET
DAVIE, FL 33331

Current Mailing Address:

1333 SW 161 AVENUE
PEMBROKE PINES, FL 33027

New Mailing Address:

14913 SW 34 STREET
DAVIE, FL 33331

FEI Number: 65-1149177

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CID, ALEXANDER
1333 SW 161 AVENUE
PEMBROKE PINES, FL 33027 US

Name and Address of New Registered Agent:

CID, ALEXANDER
14913 SW 34 STREET
DAVIE, FL 33331 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: CID ALEXANDER

01/06/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: CID, ALEXANDER
Address: 1333 SW 161 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33027

Title: V (X) Delete
Name: BLOCK, MICHAEL
Address: 3652 N ANDREWS AVE
City-St-Zip: FT LAUDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: CID, ALEXANDER
Address: 14913 SW 34 STREET
City-St-Zip: DAVIE, FL 33331

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

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CID ALEXANDER

PSTD

01/06/2005

Electronic Signature of Signing Officer or Director

Date