

**2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P01000104962

**FILED**  
**May 22, 2006**  
**Secretary of State****Entity Name:** WALKER'S FIRST CLASS CATERING, INC.**Current Principal Place of Business:**15219 N.W. 60TH AVE.  
MIAMI, FL 33014**New Principal Place of Business:**3856 N.W. 125 STREET  
OPA LOCKA, FL 33054**Current Mailing Address:**15219 N.W. 60TH AVE.  
MIAMI, FL 33014**New Mailing Address:**675 N.W. 159TH AVENUE  
PEMBROKE PINES, FL 33028**FEI Number:** 65-1151257**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**WALTER, NATHANIEL  
15219 NW 60TH AVE  
HIALEAH, FL 33014 US**Name and Address of New Registered Agent:**WALTER, NATHANIEL  
675 N.W. 159TH AVENUE  
PEMBROKE PINES, FL 33028 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: NATHANIEL WALKER

05/22/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: WALKER, NATHANIEL  
Address: 675 NW 159TH AVE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: AD ( ) Delete  
Name: WALKER, WANDA  
Address: 675 N.W. 159TH AVE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: WALKER, NATHANIEL  
Address: 675 NW 159TH AVE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: VP (X) Change ( ) Addition  
Name: WALKER, WANDA  
Address: 675 N.W. 159TH AVE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: T ( ) Change (X) Addition  
Name: WALKER, WANDA  
Address: 675 N.W. 159TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: S ( ) Change (X) Addition  
Name: WALKER, NATHANIEL  
Address: 675 N.W. 159TH AVENUE  
City-St-Zip: PEMBROKE PINES, FL 33028

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: NATHANIEL WALKER

P

05/22/2006

Electronic Signature of Signing Officer or Director

Date