2004 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 31, 2004 8:00 am **Secretary of State DOCUMENT # P02000058775** 03-31-2004 90027 003 ***150.00 RATH FOODSERVICE DESIGN, INC. Principal Place of Business Mailing Address 10960 BEACH BLVD, STE 621 10960 BEACH BLVD, STE 621 JACKSONVILLE, FL 32246 JACKSONVILLE, FL 32246 02062004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 02-0611668 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent RATH, RICHARD DO NOT WRITE 10960 BEACH BLVD, STE 621 JACKSONVILLE, FL 32246 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) 9. Election Campaign Financing. \$5.00 May Be: FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution Added to Fees 10. OFFICERS AND DIRECTORS TITLE MAME ZEREBNY, JOHN 10960 BEACH BLVD., STE 621 STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32246 TITLE ZEREBNY, M. GRETNA NAME 10960 BEACH BLVD., STE 621 STREET ADDRESS JACKSONVILLE, FL 32246 CDV-ST-7/2 TITLE Richard NAME 10960 Beach Blvd. # 621 STREET ADDRESS DO NOT WRITE CITY-ST-7P JACKSONUILLE, FL 32246 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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.

	John	Zerg	bny- when	Pres	sident
SIGNATURE:		July	Milu	<u>, </u>	

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

TITLE NAME STREET ADDRESS CITY-ST-ZIP THE

STREET ADDRESS CITY-ST-ZIP

3)13)0U

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