2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005
Secretary of State

DOCUMENT# P03000071434

Entity Name: STEPHEN MICHAEL'S CATERING SPECIALIST, INC.

Current Principal Place of Business:

129 NW 13TH STREET
TE # 19
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

129 NW 13TH STREET
TE # 19
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 04-3764788 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARRIS, JENNIFER
2411 SW 4TH STREET
BOYNTON BEACH, FL 33435 US

Name and Address of New Registered Agent:

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: _____

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: P ( ) Delete
Name: PIEKARA, STEPHEN
Address: 5786 SUN POINTE CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: S ( ) Delete
Name: PIEKARA, PROVIDENCE
Address: 5786 SUN POINTE CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: CEO ( ) Delete
Name: PIEKARA, DEANE
Address: 5786 SUN POINTE CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: PROVIDENCE PIEKARA S 05/02/2005

Electronic Signature of Signing Officer or Director Date