

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000110740

FILED
Jul 22, 2004
Secretary of State

Entity Name: CROWN CATERING AND SUNRISE SEMINARS, INC.

Current Principal Place of Business:

10125 WEST OAKLAND PARK BOULEVARD
SUNRISE, FL 33351 US

New Principal Place of Business:

10125 WEST OAKLAND PARK BOULEVARD
#421
SUNRISE, FL 33351 US

Current Mailing Address:

10125 WEST OAKLAND PARK BOULEVARD
SUNRISE, FL 33351 US

New Mailing Address:

10125 WEST OAKLAND PARK BOULEVARD
#421
SUNRISE, FL 33351 US

FEI Number: 16-1685976

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GWEN, MESTRE
10125 WEST OAKLAND PARK BOULEVARD
#421
SUNRISE, FL 33351 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: GWEN, MESTRE
Address: 10125 WEST OAKLAND PARK BOULEVARD
City-St-Zip: SUNRISE, FL 33351 US

Title: VP () Delete
Name: ROLANDO, MESTRE
Address: 10125 WEST OAKLAND PARK BOULEVARD
City-St-Zip: SUNRISE, FL 33351 US

Title: VP () Delete
Name: CARLOS, MESTRE
Address: 10125 WEST OAKLAND PARK BOULEVARD
City-St-Zip: SUNRISE, FL 33351 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SEC (X) Change () Addition
Name: ROLANDO, MESTRE
Address: 10125 WEST OAKLAND PARK BOULEVARD
City-St-Zip: SUNRISE, FL 33351 US

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: GWEN MESTRE

P

07/22/2004

Electronic Signature of Signing Officer or Director

Date