

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000118388

FILED
Mar 23, 2005
Secretary of State

Entity Name: A PERFECT MATCH CATERING CO.

Current Principal Place of Business:

830 8TH ST SE
NAPLES, FL 34117 US

New Principal Place of Business:

Current Mailing Address:

830 8TH ST SE
NAPLES, FL 34117 US

New Mailing Address:

FEI Number: 77-0611668

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHWARZ, FREDERICK W V
1054 SUMMERFIELD DR.
NAPLES, FL 34120 US

Name and Address of New Registered Agent:

SCHWARZ, FREDERICK W V
830 8TH ST SE
NAPLES, FL 34117 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:

03/23/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCHWARZ, FREDERICK W V
Address: 1054 SUMMERFIELD DR.
City-St-Zip: NAPLES, FL 34120 US

Title: VP () Delete
Name: SCHWARZ, ELIN K
Address: 1054 SUMMERFIELD DR.
City-St-Zip: NAPLES, FL 34120 US

Title: T () Delete
Name: SCHWARZ, FRED W V
Address: 1054 SUMMERFIELD DR.
City-St-Zip: NAPLES, FL 34120 US

Title: S () Delete
Name: SCHWARZ, ELIN K
Address: 1054 SUMMERFIELD DR.
City-St-Zip: NAPLES, FL 34120 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCHWARZ, FREDERICK W V
Address: 830 8TH ST SE
City-St-Zip: NAPLES, FL 34117 US

Title: VP (X) Change () Addition
Name: SCHWARZ, ELIN K
Address: 830 8TH ST SE
City-St-Zip: NAPLES, FL 34117 US

Title: T (X) Change () Addition
Name: SCHWARZ, FRED W V
Address: 830 8TH ST SE
City-St-Zip: NAPLES, FL 34117 US

Title: S (X) Change () Addition
Name: SCHWARZ, ELIN K
Address: 830 8TH ST SE
City-St-Zip: NAPLES, FL 34117 US

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: FREDERICK W. SCHWARZ V

P

03/23/2005

Electronic Signature of Signing Officer or Director

Date