

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000075640

FILED
Apr 27, 2006
Secretary of State

Entity Name: NELSON CATERING AND SUPPLY INC.

Current Principal Place of Business:

4880 DISTRIBUTION CT UNIT 8
ORLANDO, FL 32822

New Principal Place of Business:

Current Mailing Address:

4880 DISTRIBUTION CT UNIT 8
ORLANDO, FL 32822

New Mailing Address:

FEI Number: 34-1992700

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUNER, YANDI
4880 DISTRIBUTION CT UNIT 8
ORLANDO, FL 32822 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SUNER, NELSON
Address: 4880 DISTRIBUTION CT UNIT 8
City-St-Zip: ORLANDO, FL 32822

Title: V () Delete
Name: SUNER, MARIA
Address: 4880 DISTRIBUTION CT UNIT 8
City-St-Zip: ORLANDO, FL 32822

Title: T () Delete
Name: SUNER, LILIANA
Address: 4880 DISTRIBUTION COURT, UNIT 8
City-St-Zip: ORLANDO, FL 32822

Title: D () Delete
Name: SNYER, YANDI
Address: 4880 DISTRIBUTION COURT, UNIT 8
City-St-Zip: ORLANDO, FL 32822

Title: C () Delete
Name: SUNER, ANDRIS
Address: 4880 DISTRIBUTION COURT, UNIT 8
City-St-Zip: ORLANDO, FL 32822

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:

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 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: NELSON SUNER

PD

04/27/2006

Electronic Signature of Signing Officer or Director

Date