2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000170486

Address:

City-St-Zip:

20221 NW 5TH STREET

PEMBROKE PINES, FL 33029

FILED Mar 07, 2005 Secretary of State

Entity Name: ULTRACHEF CATERING OF BROWARD INC.	_
Current Principal Place of Business:	New Principal Place of Business:
20221 NW 5TH STREET PEMBROKE PINES, FL 33029	
Current Mailing Address:	New Mailing Address:
20221 NW 5TH STREET PEMBROKE PINES, FL 33029	
FEI Number: 34-2030781 FEI Number Applied For () FEI Number	mber Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 US	HOTCHKISS, JAMES A MR 20221 NW 5TH STREET PEMBROKE PINES, FL 33029 US
The above named entity submits this statement for the purpose on the State of Florida.	of changing its registered office or registered agent, or both,
SIGNATURE: JAMES A HOTCHISS	03/07/2005
Electronic Signature of Registered Agent Election Campaign Financing Trust Fund Contribution ().	Date
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: PD () Delete Name: HOTCHKISS, JAMES A JR Address: 20221 NW 5TH STREET City-St-Zip: PEMBROKE PINES, FL 33029	Title: () Change () Addition Name: Address: City-St-Zip:
Title: VD () Delete Name: HULL, ANDREW D Address: 20221 NW 5TH STREET City-St-Zip: PEMBROKE PINES, FL 33029	Title: () Change () Addition Name: Address: City-St-Zip:
Title: STD () Delete Name: HOTCHKISS, MARYANN C	Title: () Change () Addition Name:

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.

Address:

City-St-Zip:

SIGNATURE: JAMES A HOTCHKISS PD 03/07/2005