

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000065505

Entity Name: FIESTA CATERING, INC.

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

1720 MEMORY LN
JACKSONVILLE, FL 322101327

New Principal Place of Business:

1720 MEMORY LANE
JACKSONVILLE, FL 32210

Current Mailing Address:

1720 MEMORY LN
JACKSONVILLE, FL 322101327

New Mailing Address:

1720 MEMORY LANE
JACKSONVILLE, FL 32210

FEI Number: 26-0113876

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, HENRY L
10644 SQUIRES CT
JACKSONVILLE, FL 322573342 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: DP () Delete
Name: MINIEL-LOPEZ, MELINDA
Address: 1720 MEMORY LN
City-St-Zip: JACKSONVILLE, FL 322101327

Title: ST () Delete
Name: WILLIAMS, HENRY L
Address: 10644 SQUIRES CRT
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: MINIEL-LOPEZ, MELINDA
Address: 1720 MEMORY LANE
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: ST (X) Change () Addition
Name: WILLIAMS, HENRY L
Address: 10644 SQUIRES COURT
City-St-Zip: JACKSONVILLE, FL 32257 US

I hereby certify that the information supplied with this filing does not qualify 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: MELINDA MINIEL-LOPEZ

P

05/01/2009

Electronic Signature of Signing Officer or Director

Date