## 2008 FOR PROFIT CORPORATION

## tate

ANNUAL REPORT				Apr 09, 2000 00:		
1. Entity Name	MENT # P0500010472 CATERING, INC.	24			Secr	etary of St
Principal Place 810 RUE LAB FORT MYERS	BEAU CIR	Mailing Address P.O. BOX 387 LEHIGH ACRES, FL 33970	US		81    15    61    14 <b> </b> 16	
D	O NOT WRITE I	N THIS SPA	CE	04012008 No 4. FEI Number 34-2178894	Chg-P CR2E	E034 (11/05)  Applied For Not Applicable  \$8.75 Additional
.,	6. Name and Address of Current Reg	tabout A and	1	5. Certificate of Statu	s Desired	Fee Required
	-		<del></del>	T WRIT		
the obligati	named entity submits this statement for the ions of registered agent.  Signalure, typed or pholed name of registered agent and by		ed office or registe ad Agen) signature require		State of Florida   Lar	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Final Trust Fund Contribution.				i.00 May Be ded to Fees		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DIR D BORRA, BRUNO J 810 RUE LABEAU CIR FORT MYERS, FL 33913	ECTORS	-	04,	U000008868 21/08-8000	88 2-012 150.00
CITY ST-ZIP  IIILE  NAME  STREET ADDRESS  CITY ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY ST-ZIP			-		OT WRIT S SPAC	
TITLE			1			

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with a other like empowered.

SIGNATURE:

NAMÉ STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

SINATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR