2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000014240

Entity Name: EXQUISITE CATERING BY ROBERT INC

FILED Jan 28, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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315 NW 158TH LANE 15105 SW 34TH STREET PEMBROKE PINES, FL 33028 US DAVIE, FL 33331 US

Current Mailing Address: New Mailing Address:

315 NW 158TH LANE 15105 SW 34TH STREET PEMBROKE PINES, FL 33028 US DAVIE, FL 33331 US

FEI Number: 20-8356568 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

EGERT, ROBERT I
315 NW 158TH LANE
PEMBROKE PINES, FL 33028 US
EGERT, ROBERT I
15105 SW 34TH STREET
DAVIE, FL 33331 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: 01/28/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 EGERT, ROBERT I
 Name:
 EGERT, ROBERT I

 Address:
 245 NM 450T I I AND
 Address:
 4510E CM 24T I CTREET

 Address:
 315 NW 158TH LANE
 Address:
 15105 SW 34TH STREET

 City-St-Zip:
 PEMBROKE PINES, FL 33028 US
 City-St-Zip:
 DAVIE, FL 33331 US

Title: VP () Delete Title: VP (X) Change () Addition Name: EGERT. KRISTINA L Name: EGERT. KRISTINA L

Address: 315 NW 158TH LANE Address: 15105 SW 34TH STREET City-St-Zip: PEMBROKE PINES, FL 33028 US City-St-Zip: DAVIE, FL 33331 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: ROBERT EGERT P 01/28/2009