

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 01, 1999 8:00 am
Secretary of State

05-01-1999 90054 036 ***150.00

DOCUMENT # P92000002042

1. Corporation Name

BUBBALOU'S CATERING, INC.



Principal Place of Business

1302 ORANGE AVE
~~SUITE 750~~
WINTER PARK FL 32789
US

Mailing Address

1302 ORANGE AVE
~~SUITE 750~~
WINTER PARK FL 32789
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/30/1992

4. FEI Number

59-3153580

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

(NO SUITE #)

City & State

23

Zip

25

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

(NO SUITE #)

City & State

28

Zip

30

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MEINER, SAM
2443 LOT-A-FUN AVE.
WINTER PARK FL 32789

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME WHEELER, CLARENCE
STREET ADDRESS 2416 REEF COURT
CITY-ST-ZIP ORLANDO FL

☐ DELETE

TITLE D
NAME MEINER, SAM
STREET ADDRESS 2443 LOT-A-FUN AVENUE
CITY-ST-ZIP WINTER PARK FL

☐ DELETE

TITLE D
NAME BOWERS, PAULA
STREET ADDRESS 219 RIPPLING LANE
CITY-ST-ZIP WINTER PARK FL

☐ DELETE

TITLE D
NAME WESTON, ALFRED S.
STREET ADDRESS 1171 AUDUBON WAY
CITY-ST-ZIP MAITLAND FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

4/27/99

Date

407-599-5900

Daytime Phone #

CR2E034 (11/98)