2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2009
Secretary of State

DOCUMENT# P92000007775

Entity Name: FIRE FIGHTERS CATERING CORP.

Current Principal Place of Business:

8000 NW 21ST STREET
SUITE 222
MIAMI, FL 33126 US

New Principal Place of Business:

Current Mailing Address:

8000 NW 21ST STREET
SUITE 222
MIAMI, FL 33126 US

New Mailing Address:

FEI Number: 65-0410775 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HILLS, STANLEY
8000 N.W. 21ST ST
SUITE 222
MIAMI, FL 33122 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: HILLS, STANLEY
Address: 8000 NW 21 STREET, SUITE 222
City-St-Zip: MIAMI, FL 33122

Title: VPD ( ) Delete
Name: CRUZ, AL
Address: 8000 NW 21 STREET, SUITE 222
City-St-Zip: MIAMI, FL 33122

Title: S ( ) Delete
Name: RAINEY, GARY
Address: 8000 NW 21 STREET, SUITE 222
City-St-Zip: MIAMI, FL 331221605

Title: VP ( ) Delete
Name: THOMSON, MICHAEL
Address: 800 NW 21 STREET SUITE 222
City-St-Zip: MIAMI, FL 33122

Title: T ( ) Delete
Name: DEL CUETO, JOAQUIN
Address: 8000 NW 21 ST SUITE 222
City-St-Zip: MIAMI, FL 33122

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change ( ) Addition
Name: JESSUP, STEVE
Address: 8000 NW 21 ST SUITE 222
City-St-Zip: MIAMI, FL 33122

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: STANLEY HILLS PRES 02/25/2009

Electronic Signature of Signing Officer or Director Date