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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000040628 (8)

CHESS CATERING COMPANY INCORPORATED

Principal Place of Business

Mailing Address

-7000 CW 45 CT

FILED Apr 25 1997 8:00am Secretary of State



MAM FL-60165	MIAMI PL 33155-4506)				
				3. Date Incorporated or Qualified 06/08/1993	3a. Date of Last Report 05/01/1996	
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	<u> </u>	Applied For
21 3707 MEADOWOOD	COURT 26 P.O. BOX	34-7183	3	65-0418533		Not Applicable
Sulte, Apt. #, etc.	Suite, Apt. #, etc),		5. Certificate of Status Desired	1 1 7 -	.75 Additional ee Required
City & State	City & State			6. Election Campaign Financing	\$:	5.00 May Be
23 FT. LAUDERPALE,	FL 28 CORAL G	ABLES, FL	, 	Trust Fund Contribution		dded to Fees
Zip Country 25 Alexand	29 33234	Country 30		8. This corporation has liability for in Florida Statutes	ntangible tax ur Yes 🏻 No	nder s. 199.032,
9, Name and Address	s of Current Registered Agent			10. Name and Address of New Reg	istered Agent	
CHESS, STEVEN		81	Name			
-7399 SW-45-6T:		82	Street Add	dress (P.O. Box Number is Not Acceptable	e)	
MIAMI FL 33155			270	7 MEADOWOOD COVET	<u> </u>	
		83		•		
		84	City		—. 85	Zip Code
			ÉT.	LAUDERDALE	PL	33332
office or registered agent, or both, i	ins 607,0502 and 607.1508, Florida s In the State of Florida. Such change of the obligations of, Section 607.050	was authorized by	the corpora	poration submits this statement for the pi ation's board of directors. I hereby accep	urpose of chan t the appointme	ging its registered ant as registered
SIGNATURE Signature, typed or printed name of	f registered agent and title if applicable.	(NOTt : Registored Ager	it signature requ	ired when reinstating)	DATE	
	ICERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRE	CTORS IN 12
TITLE PST	DELET	E 1.1 TITLE			□ c	hange 🔲 Addition
NAME CHESS, STEVEN		1.2 NAME				
STREET ADDRESS 7899 SW-45 ST.		1.3 \$TREE1 /	ADDRESS 3	707 MEADOWADD QUET		
CITY-ST-ZIP -MIAMI FL 33155		1.4 CITY - ST	- ZIP	T. LAUDER DALE, FL.	53552	
TITLE	☐ DELFT	E 2.1 TITLE			□ c	hange
NAME		2.2 NAME.				
STREET ADDRESS		2.3 STREET	ADDRESS			
CITY-ST-ZIP		2. 4 CITY-S	I - ZIP			
TITLE	☐ DELET	E 3.1 THILE			[_] C	hange Addition
NAME		3.2 NAME				
STREET ADORESS		3.3 \$1REE1 /	ADDRESS			
CITY-ST-ZIP		3.4. CITY - S	I - 21P			
TITLE	DELFT	E 4.1 TITLE			[] C	hange 🔲 Addition
NAME		4. 2 NAME				
STREET ADDRESS		4.3 STREET	ADDRESS			
CITY-ST-ZIP		4.4 CITY- ST	- ZIP			
TITLE	L] DELET	E 5.1 TITLE	1		L□c	hange 🔲 Addition
NAME		5.2 NAME				
STREET ADDRESS		5.3 STREFT	ADDRESS			
CITY-ST-ZIP		5.4 CITY-ST	-7P		-,	
TITLE	☐ DELET	E 6.1 TITLE			∐ C	hange 🔲 Addition
NAME		6.2 NAME				ļ
STREET ADDRESS		63 STREET	ADDRESS			
CITY-ST-ZIP		64 CHY-S1				
14. I do hereby certify that the informat	ion supplied with this filing does not	qualify for the exer	nption state	ed in Section 119.07(3)(i), Florida Statutes	 I further certified 	ly 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