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

Mailing Address BO40 NW 54TH ST

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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LAUDERHILL FL 33351-5069

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

Country

81 Name

B3

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.

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DOCUMENT # **P94000051860 (2)**

Country

9. Name and Address of Current Registered Agent

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BARBERA, VINCENT 8040 NW 54TH ST

LAUDERHILL FL 33351

V. B. CATERING, INC.

Principal Place of Business

2. Principal Place of Business

8040 NW 54TH ST

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 $Z_{\rm IP}$

LAUDERHILL FL 33351

Suite, Apt. #, etc.

SIGNATURE:

City & State

Sognature trypics or printed name of registered agon) and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. (96/6) 12. Change Addition DELETE HILE 1.1 TITLE BARBERA, VINCENT 1.2 NAME NAM: 8040 NW 54TH ST 1.3 STREET ADDRESS STREET ADDRESS LAUDERHILL FL 33351 1.4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 2.1 THLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 31 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE THUE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADORESS 4.4 City - St - ZIP CITY: ST-20F ☐ Addition DELETE Change 51 TITLE THLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-SI-ZIP Change Addition DELETE 6.1 TITLE THILE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not quality 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. CITY - ST - ZIP

INCE T BARBELLA Pars.
GAING OFFICER OR DIRECTOR

FILED			
Apr 04 1997	8:00am		
Secretary of	f State		

3.	Date Incorporated or Qualified 07/13/1994	3a. Date of Last Report 04/26/1996	
4.	FEt Number 65-0506019		Applied For Not Applicable
Б.	Certificate of Status Desired		\$8.75 Additional Fee Required
6.	Election Campaign Financing		\$5.00 May Be

This corporation has liability for intangible tax under s. 199.032,

10. Name and Address of New Registered Agent

X Yes No

Added to Fees

Zip Code

85

Trust Fund Contribution

Florida Statutes

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