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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

P94000073402 (7)

PINOY CATERING CORPORATION

Principal Place of Business	Mailing Address		
10841 N.W. 24TH STREET CORAL SPRINGS FL 33065	10841 N.W. 24TH STREE CORAL SPRINGS FL 330		

FILED May 06 1998 8:00am Secretary of State



	r. 24TH STREE		10841 N.W. 24TH STE CORAL SPRINGS FL				DO NOT WRITE IN THIS SPACE
							3. Date incorporated or Qualified 10/03/1994
2. Principal Place of Business 2a. Mailing Address 21				· · · · · · · · · · · · · · · · · · ·		4, FEI Number Applied For 65-0523258 Not Applicable	
Suite, Apt. #, etc.		Suite, Apt #, etc.				5 Certificate of Status Desired \$8.75 Additional	
22 27 City & State		City & State				Fee Required 6. Election Campaign Financing \$5.00 May Be	
23 28					Trust Fund Contribution Added to Fees		
Zip		Country	Zip	Country			This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes □ No
24		and Address of Current	29 t Registered Agent	30	Γ		10. Name and Address of New Registered Agent
					81	Name	
10841 N.W. 24TH STREET				82	Street	Address (P.O. Box Number is Not Acceptable)	
(CORAL SPRINGS FL 33065				83		
					_	50	
					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				TE Bulle			o required when reinstating) DATE
12.	Signature, lypod	or ported name of registered ages OFFICERS AND		13.	a Aga	nt signature	e required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D		☐ DELETE	1.1 Tr	TLE		Change Addition
NAME		, amelia y		1.2 N/	AMF		
STREET ADDRESS		N.W. 24TH STREET		1.3 ST	REET	ADDRESS	
CITY-ST-ZIP		L SPRINGS FL 33065	Deleve		1.4 CITY - ST - ZIP		Distance Distance
TITLE	D	IEEEDEV C	☐ DÉLÉT E		2.1 TITLE		Change Addition
NAME STREET ADDRESS	,	, JEFFREY C N.W. 24TH STREET		2.2 NAME 2.3 STREET		ADDDECC	
CITY-ST-ZIP		L SPRINGS FL 33065			2.4 CITY-S		
TITLE	PVST		DELET E		3.1 TITLE		Change Addition
NAME	PUMA	, amelia y		3.2 NAME			
STREET ADDRESS		N.W. 24TH STREET		3.3 51	REET	address	
CITY-ST-ZIP	CORA	L SPRINGS FL 33065				T - ZiP	
TITLE			DELETE	4.1 Ti			☐ Change ☐ Addition]
NAME				4. 2 N		LDADEAA	
STREET ADDRESS CITY - ST - ZIP				4.3 ST		ADDRESS	
TITLE			DELETE	5.1 10		1-24	Change Addition
NAME				5.2 NA			
STREET ADDRESS	-			5.3 \$1	REET	address	
CITY-ST-ZIP				5.4 CI	1Y-\$	T-21P	
TITLE			DELETE	6.1 TI	TLE		Change Addition
NAME	4			6.2 NA			
STREET ADDRESS]					ADDRESS	
CITY-ST-ZIP				6.4 CI	TY-S	T-ZIP	

Thereby 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.