• 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

99 FEB 15 PM 12:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000075028

1. Corporation Name

RITA CATERING, INC.

Principal Place of Business

1637 N.COCOA BLVD
COCOA, FL. 32922

Mailing Address

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/12/1994

4. FEI Number: 59-3307312 [ ] Applied For [ ] Not Applicable

5. Certificate of Status Desired [ ] $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] $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 1637 N.COCOA BLVD
Suite, Apt #, etc
22
City & State
23 COCOA, FLORIDA
Zip
24 32922
Country
25 USA

2a. Mailing Address
26
Suite, Apt #, etc
27
City & State
28
Zip
29
Country
30

9. Name and Address of Current Registered Agent

FILINGS INC.
3732 N.W 16TH STREET
FT. LAUDERDALE FL 33311

10. Name and Address of New Registered Agent

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, type or print name of registered agent and title of officer

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	PRESIDENT
NAME		~~PARIKH RITA S.~~ RITA S. PARIKH
STREET ADDRESS		2165 DUMAS STREET
CITY-ST-ZIP		MERRITT ISLAND FL 32952
TITLE	M	
NAME		SHAILENDRA PARIKH
STREET ADDRESS		2165 DUMAS STREET
CITY-ST-ZIP		MERRITT ISLAND FL 32952

[ ] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[ ] Change [ ] Add

AMOUNT PAID 4
-02/19/99--01070--008
****150.00 ****150.00

[ ] Change [ ] Add

2-16-99

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 be 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: Shailendra Parikh 02/09/99

CR2E034 (11/98)