

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

FILED
Mar 20 1997 8:00am
Secretary of State

DOCUMENT # **P95000026635 (9)**

1. Corporation Name

COSITORE CATERING CORPORATION

Principal Place of Business

**2724 STICKNEY PT. RD.
SARASOTA FL 34231**

Mailing Address

**4294 HEARTHSTONE DR.
SARASOTA FL 34238-3235**



2. Principal Place of Business

21 4294 Hearthstone Dr.
Suite, Apt. #, etc.

2a. Mailing Address

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Sarasota
Zip

28 Zip

Country

29 Zip

Country

24 34238

25 USA

30

9. Name and Address of Current Registered Agent

**COSITORE, DANIEL A
4294 HEARTHSTONE DR.
SARASOTA FL 34238**

3. Date Incorporated or Qualified

04/04/1995

3a. Date of Last Report

05/01/1996

4. FEI Number

65-0571764

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

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 long or short name of registered agent and fee if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DVAT	☐ DELETE
NAME	COSITORE, DANIEL A	
STREET ADDRESS	4294 HEARTHSTONE DRIVE	
CITY- ST- ZIP	SARASOTA FL 34238	
TITLE	DST	☐ DELETE
NAME	COSITORE, CAROLE	
STREET ADDRESS	4294 HEARTHSTONE DRIVE	
CITY- ST- ZIP	SARASOTA FL 34238	
TITLE	DPAS	☐ DELETE
NAME	COSITORE, DANIEL A JR.	
STREET ADDRESS	4294 HEARTHSTONE DRIVE	
CITY- ST- ZIP	SARASOTA FL 34238	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY- ST- ZIP	

14. I do 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 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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/16/97

(971)918-8062

CR2E034 (9/96)