

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Jul 26, 1999 8:00 am
Secretary of State

07-26-1999 90003 029 ***550.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000046815**

1. Corporation Name

HOSPITALITY CONTRACTING SERVICES, INC.

Principal Place of Business

EXECUTIVE COURT 11, SUITE 232
2300 CORPORATE BLVD., N.W.
BOCA RATON FL 33431

Mailing Address

8534 E. KEMPER RD.
CINCINNATI OH 45249

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/14/1995

4. FEI Number

65-0681732

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.

☐

Yes ☐ No

2. Principal Place of Business

21 2300 Corporate Blvd. NW

Suite, Apt. #, etc.

22 Suite 232

City & State

23 Boca Raton, FL

Zip

24 33431

25 Palm Beach

2a. Mailing Address

26 2300 Corporate Blvd. NW

Suite, Apt. #, etc.

27 Suite 232

City & State

28 Boca Raton, FL

Zip

29 33431

Country

30 Palm Beach

9. Name and Address of Current Registered Agent

BECK, LOUIS S
EXECUTIVE COURT 11, SUITE 232
2300 CORPORATE BLVD., N.W.
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

81 Name

Steven S. Throne

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

2300 Corporate Blvd. NW

83

84 Suite 232

City

Boca Raton

FL

85

Zip Code

33431

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, printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

7/20/99

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	BECK, LOUIS S	
STREET ADDRESS	2300 CORPORATE BLVD. STE. 232	
CITY-ST-ZIP	BOCA RATON FL 33431	
TITLE	V	<input type="checkbox"/> DELETE
NAME	THRONE, STEVE	
STREET ADDRESS	2300 CORPORATE BLVD. STE. 232	
CITY-ST-ZIP	BOCA RATON FL 33431	
TITLE	S	<input type="checkbox"/> DELETE
NAME	YEAGGY, HARRY	
STREET ADDRESS	8534 E. KEMPER RD.	
CITY-ST-ZIP	CINCINNATI OH 45249	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Steven S. Throne	
1.3 STREET ADDRESS	2300 Corporate Blvd. NW Suite 232	
1.4 CITY-ST-ZIP	Boca Raton FL 33431	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE	Vp Paul Stingo	
2.2 NAME	2300 Corporate Blvd. NW suite 232	
2.3 STREET ADDRESS	Boca Raton, FL 33431	
2.4 CITY-ST-ZIP		
3.1 TITLE	Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Paul Stingo	
3.3 STREET ADDRESS	2300 Corporate Blvd. NW Suite 232	
3.4 CITY-ST-ZIP	Boca Raton FL 33431	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 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

Date

Daytime Phone #

Steven S. Throne Pres- 7/20/99 561 947-2325

CR2E034 (5/99)

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