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

PROFIT CORPORATION ANNUAL REPORT

1**9**98

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000047832 (7)

S.U. BANQUET SERVICES, CORP.

FILED
May 14 1998 8:00am
Secretary of State

Principal Plac	e of Business	Mailing Address	Mailing Address			. I INDIANI IIN IRINI NIIII RRIII NRIII NIIII NIIII	I BABAN TOBON NOTABL NYSAU NADA TABAN
10782 SW 24 ST		10782 SW 24 ST					
OLIMPIA FL 33165		OLIMPIA FL 33165	1 OLIMPIA FL 33165			DO NOT WRITE IN T	HIS SPACE
US		US			3. Date Incorporated or Qualified		
		,				06/16/1995	
· ·	lace of Business	2a. Mailing Address				4. FEI Number	Applied For
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	Suite Ant # etc			65-0588889	Not Applicable \$8.75 Additional
22		27	— · · · · · · · · · · · · · · · · · · ·			5. Certificate of Status Desired	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	Added to Fees	
Zip Country		h	Zip Country			8. This corporation owes or has paid the	
24	25 25 Name and Address of Curre	nt Registered Agent	30]			Personal Property Tax due June 30. 10. Name and Address of New Registe	Yes No
ESE	PINOSA, ANTERO	······································		81	Name	10.	TOO FIGURE
	68 S.W. 24TH ST.			82	Stroot Addr	ess (P.O. Box Number is Not Acceptable)	
	TE 426		[02	Street Addre	ess (F.O. BOX Number is NOt Acceptable)	
MIA	MI FL 33165		[83			
-			-	84	City	·····	85 Zip Code
dd Director	to the provisions of Captions COZ OC	00 1 COZ 1COO F(24- Pr-1				oration submits this statement for the purpo	FL
office or r	egistered a gent, or both, in the Stati	e of Florida. Such change was	s authorized	l by i	the corporation	oration submits this statement for the purpo on's board of directors. I hereby accept the	se of changing its registered appointment as registered
"	m familiar with, and accept the obliq	jations of, Section 607.0505, I	Torida Statu	ites.			
SIGNATURE	Signature, typod or printed name of registered as	ent and title if applicable (Ne	DTE: Registered	Agont	t signature require	ed when reinstating) DA	JE
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	D	DELETE	117171	LĒ			☐ Change ☐ Addition
NAME	ESPINOSA, ANTERO		1.2 NAM	ME			
STREET ADDRESS	10782 SW 24 STREET #1				ADDRESS		
CITY-ST-ZIP TITLE	OLYMPIA FL	DELFTE	1.4 CIT 2.1 TITL		- ZIP		Change Addition
NAME			2 2 NA				C change C Applition
STREET ADDRESS			1		DORESS		
CITY-ST-ZIP			2. 4 CIT				
TITLE		DELETE	3.1 Titl				Change Addition
NAME			3.2 NAN	ME			
STREET ADDRESS			3.3 STR	EET A	DDRESS		
CITY-ST-ZIP			3.4 CIT	Y-ST	- ZIP		
TITLE		L_J DELETE	4.1 TITL	Æ			Change Addition
NAME	•		4. 2 NAI				
STREET ADDRESS					DDRESS		
CITY-\$T-ZIP TITLE		DELETE	4.4 CITY		ZIP		Change Addition
NAME	•	ال مردداد	5.1 TRE 5.2 NAM				☐ custolitie ☐ M00(00);
STREET ADDRESS			5.2 NAN 5.3 STR		DDRESS		
CITY-ST-ZIP			5.3 STR 5.4 CITY		1		
TITLE		DELETE	61 THL		E11		Change Addition
NAME.			62 NAN				
STREET ADDRESS					DDRESS		

5.4 CITY - ST - ZIP

FEDULACO 11/15/10 205-127-310/

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 trusted 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.