

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000055791 (4)

1. Corporation Name

FEEDING WELL CATERING, INC

97 MAY 14 PM 12:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

Mailing Address

14565 S.W. 75 ST.
MIAMI FL 33183

14565 S.W. 75 ST.
MIAMI FL 33183

3. Date Incorporated or Qualified
07/17/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 14565 SW 75 ST
Suite, Apt. #, etc.

26 14565 SW 75 ST
Suite, Apt. #, etc.

4. FEI Number

Applied For

65-0603548

Not Applicable

22 City & State

27 City & State

23 MIAMI FL

28 MIAMI FL

24 Zip

Country

25 Zip

Country

33183

HAIE

33183

HAIE

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

AGARWAL & AGARWAL, P.A.
930 WASHINGTON AVE, #208
MIAMI BEACH FL 33139

81 Name
Donna-Maria Johnson, C.P.A.

82 Street Address (P.O. Box Number is Not Acceptable)
7504 S.W. 179 Terrace

83

84 City
Miami

FL

85 Zip Code
33157

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: Typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/29/97
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
PRESIDENT
MARIE M. DAVID
14565 SW 75 ST MIAMI FL 33183

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

1.1 TITLE
12 NAME
13 STREET ADDRESS
14 CITY- ST- ZIP

2.1 TITLE
22 NAME
23 STREET ADDRESS
24 CITY- ST- ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

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-05/19/97-01194-013
***200.00 ***200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

MARIE M. DAVID
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-86-97 (305) 382-9435
Date Daytime Phone #

CR2E034 (12/95)