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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000058179 (9)

RB CATERING SERVICES, INC.

FILED Mar 26 1998 8:00am Secretary of State



			 						
Principal Place of Business Mailing Address 1301 10TH STREET 4360 NORTHLAKE BLVD.									
LAKE PARK FL 33403			STE 205 PALM BEACH GARDENS FL 33410				DO NOT WRITE IN THIS SPACE		
US							3. Date Incorporated or Qualified 07/25/1995		
2. Principal Place of Business			2a. Mailing Address				4. FEt Number	A	pplied For
21		26	26				65-0608534	N	ot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional
22			27				g. Continuate of States Seemed		beniupe
City & State	9	<u> </u>	City & State				6. Election Campaign Financing		May Be
Zip	Country	28	200	Cour	ntri		Trust Fund Contribution		to Fees
-		29	Zip Country				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
24 25 29 29 29 29 29 25 29 29 25 29 29 25 25 25 25 25 25 25 25 25 25 25 25 25							10. Name and Address of New Registered Agent		
WΔ	SHOFSKY, MARTIN E				81	Name		_	
4360 NORTH LAKE BLVD				}	62	Stroot Add-o	ess (P.O. Box Number is Not Acceptable)		
	ITE 205			İ	02	Sliebt Addie	ass (F.O. Box Number is Not Acceptable)		
PAI	LM BEACH GARDENS FL 3341	0		Ī	83				
•				<u> </u>	84	City		85 Zip	Code
					•	City	FL	. 63 21	Code
office of re	to th e provisions of Sections 607.05 egistered agent, or both, in the Stat in familiar with, and accept the oblig	e of Florida	Such change was	authorized	f by	the corporation	pration submits this statement for the purpose con's board of directors. I hereby accept the app	f changing i pointment as	ts registered registered
SIGNATURE .									
12.	Signature, typec or printed name of registered at OFFICERS A!			1E: Registered	Age	nt signature require	d when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS AN	DIRECTO	20 INI 12
TITLE	PD	NO DIFFECT	DELETE	1.1 7/1	LF.		ADDITIONS/CHANGES TO CITICENS AN	Change	Addition
NAME	HUDSON, ANGELA		_	1.2 NA					_
STREET ADDRESS	1301 10TH STREET					ADDRESS			
CITY-ST-ZIP	LAKE PARK FL 33403			1.4 CIT					i
TITLE	☐ DEL E TE				2.1 TITLE			Change	Addition
NAME			2.2 NA	2.2 NAME				Ì	
STREET ADDRESS				2.3 STF	REET	ADDRESS			İ
CITY-ST-ZIP				2. 4 CH	IY-S	T-21P			
TITLE	· · · · · · · · · · · · · · · · · · ·		DELETE	3.1 TIT	LE		· —	☐ Change	Addition
NAME				3.2 NA	ME				
STREET ADDRESS				3.3 STF	REET	ADDRESS			1
CITY-ST-ZIP				3.4. CI		IT-ZIP		T-1 2	
TITLE			DELETE	4.1 THT				□ Change	☐ Addition
NAME				4. 2 NA					
STREET ADDRESS						ADDRESS			ĺ
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TITLE			DELETE	5.1 7(7)			3000024687	-ts-1-tghange	Addition
NAME				5.2 NAI			-03/26/98010080	ſί	
STREET ADDRESS				4		ADDRESS	***1500.00		
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TITLE			☐ DELETE	6.1 TITE				Change	ן ייייפשא <i>בע</i> נ
NAME				6.2 NA		4000000		゛゙゙゙゙゙゙゙゙゙゚゚	, n
STREET ADDRESS				6.3 STF	SEE I	ADDRESS		ار	W/

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 truspe amproved 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 standards.