P95000062332

P.16

PUBLIC ACCESS SYSTEM
(((H95000009644))) ELECTRONIC FILING COVER SHEET

TO: DIVISION OF CORPORATIONS
DEPARTMENT OF STATE
STATE OF FLORIDA
409 EAST GAINES STREET
TALLAHASSEE, FL 32399
FAX: (904) 922-4000

FROM: EMPIRE CORPORATE KIT COMPANY
1492 W FLAGLER ST
SUITE 200
MIAMI FL 33135-2920
CONTACT: RAY STORMONT
PHONE: (305) 541-3694
FAX: (305) 541-3770

(((H95000009644))) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR [illegible]

NAME: CULINARY CONCEPTS 2000, INC.
FAX AUDIT NUMBER: H95000009644
DATE REQUESTED: 08/30/1995
CERTIFIED COPIES: 0
NUMBER OF PAGES: 3
ESTIMATED CHARGE: $70.00
CURRENT STATUS: REQUESTED
TIME REQUESTED: 10:07:24
CERTIFICATE OF STATUS: 0
METHOD OF DELIVERY: FAX
ACCOUNT NUMBER: [illegible]

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(((H95000009644)))
** ENTER 'M' FOR MENU. **
ENTER SELECTION AND <CR>.
Help F1 Option Menu F2

NUM CAPS Connect: 00:10

FILED
95 AUG 30 PM 4:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

95 AUG 30 PM 4:27

OF

CULINARY CONCEPTS 2000, INC.

H95000096440

THE UNDERSIGNED Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

CULINARY CONCEPTS 2000, INC.

FILED
95 AUG 30 PM 4:29
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
1174 SW 118TH TERRACE
DAVIE FLORIDA, 33325

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is SEVEN THOUSAND FIVE HUNDRED (7,500) shares having a par value of ONE DOLLAR ($1.00) per share.

ARTICLE IV INITIAL BOARD OF DIRECTORS

The number of Directors constituting the initial Board of Directors of this Corporation is one (1). The number of Directors may be either increased or decreased from time to time by an amendment of the By-Laws but shall never be less than one (1). The names and addresses of the initial Board of Directors are:
CHARLES MILTENBERGER
1174 SW 118TH TERRACE
DAVIE FLORIDA, 33325

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):
CHARLES MILTENBERGER
1174 SW 118TH TERRACE
DAVIE FLORIDA, 33325

H95000096440

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:
CHARLES MILTENBERGER
1174 SW 118TH TERRACE
DAVIE FLORIDA, 33325

PREPARED BY:
ANTHONY G. COLEMAN, ESQ.
6363 N.W. 6 WAY # 210
Ft. LAUD., FL 33309
(305) 776.1001
FL. Bar NO. 368563

The undersigned has(have) executed these Articles of Incorporation this date.
AUGUST 28, 1995

CHARLES MILTENBERGER, Incorporator

H95000009644

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: CULINARY CONCEPTS 2000, INC.

2. The name and address of the registered agent and office is:
CHARLES MILTENBERGER
1174 SW 118TH TERRACE
DAVIE FLORIDA, 33325

SIGNATURE

TITLE: PRESIDENT

DATE: AUGUST 28, 1995

Having been named Registered Agent to accept service of process for the above stated Corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent
CHARLES MILTENBERGER
1174 SW 118TH TERRACE
DAVIE FLORIDA, 33325

AUGUST 28, 1995 DATE

H95000009644

FILED
95 AUG 30 PM 4:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

FILED
96 OCT -2 PM 5:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000067332

Corporation Name:

CULINARY CONCEPTS 2000, INC.

Principal Place of Business:
1174 S W 118TH TERRACE
DAVIE FL 33325

Mailing Address:
1174 S.W. 118TH TERRACE
DAVIE FL 33325

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable
Suite, Apt. # etc.
City & State
Zip | Country

3. New Mailing Office Address, if Applicable
Suite, Apt. # etc.
City & State
Zip | Country

4. Date Incorporated or Qualified To Do Business in Florida: 08/30/1995

5. FEI Number: 65-0618111 | Applied For | Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director for (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	MILTENBERGER, CHARLES	1174 S.W.1 18TH TERRACE	DAVIE FL 33325

700001977037--2
-10/16/96--01060--012
****375.00 ****375.00

700001977037--2
-10/16/96--01060--013
******8.75 ******8.75

REINSTATEMENT

8. Name and Address of Current Registered Agent
MILTENBERGER, CHARLES
1174 S.W. 118TH TERRACE
DAVIE FL 33325

9. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc.
City | State: FL | Zip Code

CR2E040 (7/96)

10. I hereby appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent
REGISTERED AGENT MUST SIGN
Date 9/27/96

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☐
(See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 9/27/96
Daytime Phone #

0062257 AF

DEBIT MEMORANDUM

P950000 10/4/96 332595

TO : DEPARTMENT OF STATE

FOR OFFICIAL USE

DATE

NUMBER

STATE OF FLORIDA
OFFICE OF STATE TREASURER
TALLAHASSEE FLORIDA

FUND	AMOUNT	REASON RETURNED	KEY #	
GENERAL REVENUE	0.00	INSUFFICIENT FUNDS	1	
TRUST	4,452.50	ACCOUNT CLOSED	2	3
OTHER		UNCOLLECTED FUNDS	3	
TOTAL	4,452.50	OTHER	4	

700002150667--3
-04/22/97--01054--003

CROSS REF	DISTRIBUTION SAMAS CODE	REASON	AMOUNT
12	45-20-2-130001-45300000-00-000100-00	1	225.00
12	45-20-2-130001-45300000-00-000100-00	1	260.00
12	45-20-2-130001-45300000-00-000100-00	1	375.00
12	45-20-2-130001-45300000-00-000100-00	1	375.00
12	45-20-2-130001-45300000-00-000100-00	1	375.00
12	45-20-2-130001-45300000-00-000100-00	1	375.00
12	45-20-2-130001-45300000-00-000100-00	1	375.00
12	45-20-2-130001-45300000-00-000100-00	1	375.00
12	45-20-2-130001-45300000-00-000100-00	1	375.00
12	45-20-2-130001-45300000-00-000100-00	1	383.75
12	45-20-2-130001-45300000-00-000100-00	1	383.75
			575.00

GRAND TOTAL: $ 4,452.50

71595-D

Process Date: 10/28/96

The above named fund(s) has been reduced by the amount of this check(s) under authority of Section 215.34, F.S.

State Treasurer