2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P95000080082 1. Entity Name M & S RESTAURANT EQUIPMENT COMPANY



FILED Jan 27, 2005 08:00 AN Secretary of State

Principal Place of Business 2915 HILLSBORO RD. WEST PALM BEACH, FL 33405

SIGNATURE: 1/2

Mailing Address

2915 HILLSBORO RD. WEST PALM BEACH, FL 33405



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· L.	VO NOT WHITE II	v inis spau	∕ ⊑	4. FEI Number 65-06507	65		Applied For Not Applicable
			5. Certificate of Status Desired See Required				
	6. Name and Address of Current Regis	tered Agent			1.1.1.1.1.1.1.1.1	4	···············
BUTLER, MICHAEL C JR 4063 DAVIS RD LAKE WORTH, FL 33461					IOT WI HIS SP	11:11:11:11:11:11	
the obliga	named entity submits this statement for the plions of registered agent.	burpose of changing its registered	d office or register	ed agent, or both, i	n the State of Flori	da. I am familia	r with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and the	f applicable. (NOTE: Registered /	Agent signature required	when renatating)		DATE	
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.		00 May Be ed to Fees			
10.	OFFICERS AND DIREC	CTORS		navandski kalisasi	11 11 11 11 1 1 1 1 1 1		mili n idel vin
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NAME STREET ADDRESS CITY+ST-ZIP	BUTLER, MICHAEL C JR 4063 DAVIS RD LAKE WORTH, FL 33461					0007-015	
name Street address City-St-Zip				a inang walao Érong papilanapan	IOT WI	4. 9. 1.	
TITLE NAME STREET ADDRESS CITY+ST-ZIP					HIS SP	ACE	
title Name Street adoress City-St-Zip							
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12. I hereby of indicated of the corrections of the corrections.	ertify that the information supplied with this fit on this report or supplemental report is true a poration or the receiver or trustee empowered or on an attachment with an address, with all	ing does not qualify for the exemy not accurate and that my signatur to execute this report as required other like empowered	otion stated in Secretary states in Secretary states of the secretary states o	ction 119.07(3)(i), F ame legal effect as Florida Statutes; a	lorida Statutes 1 fu if made under oa nd that my name a	urther certify that in, that I am an appears in Block	t the information officer or director 10 or Black 11 if

TOW OR DIRECTOR