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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jun 03 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000091542 (7)

INTERNATIONAL CUISINE OF PALM BEACH, INC.

Principal Place of Business Mailing Address  12794 W. FOREST HILL BLVD.  WEST PALM BEACH FL 33414  MEST PALM BEACH FL 3					
				3. Date Incorporated or Qualified 12/01/1995	3s. Date of Last Report 09/09/1996
	Place of Business	2a. Mailing Address	7 to 100 years 1 days 100 miles 100	4. FEI Number	Applied For
21		26		65-0634098	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Žip	Country	Zıp	Country	8. This corporation has liability for	<del></del>
24	25	29	30		Yes No
	g, Name and Address of Currer	nt Registered Agent		10. Name and Address of New Re	gistered Agent
	DDES, SUSAN O		81 Name		
13619 STAIMFORD DR			82 Street Add	fress (P.O. Box Number is Not Acceptab	ole)
l ME	ST PALM BEACH FL 33414		B3		
			84 City		FL 85 Zip Code
11. Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 607 056 registered agent, or both, in the State im familiar with, and accept the oblig	e of Florida. Such change was a lations of, Section 607.0505, Flo	les, the above-named cor authorized by the corpora orida Statutes.	poration submits this statement for the pation's board of directors. I hereby acception with the patients of the patients are particularly the patients and the patients are particularly the patients are patients are particularly the patients are particularly the patients are particularly the patients are patients.	purpose of changing its registered of the appointment as registered
12.		D DIRECTORS	1 13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	V	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	RHODES, THOMAS A		1.2 NAME		
STREET ADDRESS	12621 WHITE CORAL DR.		1.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 33414		1.4 CITY - ST - ZIP		
TITLE	P	DELETE	21 TILE # 5	USAW O. Rhodis	Change Addition
NAME	RHODES, SUSAN O		2.2 NAME / 3	2530 Westhampton	Cir
STREET ADDRESS	13619 STAIMFORD DR.   West Palm Beach Fl 33414	4	2.3 STREET ADDRESS	Jost Pola Royal I	21 27414
CITY-ST-ZIP	ST	DELETE	2.4 CITY - SI - ZIP	ocsi raim beack, r	Change Addition
NAME	DAVIDSON, RICHARD T	P. Detter	3.1 THE 3.2 NAME	Vest Palm Beach, F Richard Davidson 2530 Westhampton	
STREET ADDRESS	13619 STAIMFORD DR.		3.3 STREET ADDRESS	2530 Westhampton	10
CITY-ST-ZIP	WEST PALM BEACH FL 33414	4	3.4 CITY - ST - ZIP	West Palm Brack f	7 37414
TITLE		DELETE	4.1 TOLE	e or rain court	Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-7IP		
TITLE		DELETE	5.1 117LE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	<u> </u>	DELETE	5.4 CITY-ST-ZIP 6.1 THLE	· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition
NAME			6.2 NAME		□ Vitality □ Nutility
STREET ADDRESS			6.3 STREFT ADDRESS		

14. I do 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 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