SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P96000055670 (9) PALM CATERERS OF MIAMI, INC. Principal Place of Business Mailing Address 7500 S.W. 120TH ST., 7500 S.W. 120TH ST., MIAM! FL 33156 MIAMI FL 33156 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21 26 65-0716994 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 22 27 City & State City & State 6. Election Campaign Financing 23 Trust Fund Contribution 28 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Zip Country Zip Country 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 KUSNICK, HOWARD A 8211 W. BROWARD BLVD. #420 83 FT. LAUDERDALKE FL FL 33-324 SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstaling) 12. OFFICERS AND DIRECTORS 13.

FILED Oct 07 1998 8:00am Secretary of State



Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

Street Address (P.O. Box Number is Not Acceptable) Zip Code 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. CR2E034 (5/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE DELETE Change Addition KAUFMAN, ERIC 1.2 NAME NAME 7500 S.W. 120TH ST. 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 21 TITLE Change ___ Addition FRIEDMAN, STUART NAME 2.2 NAME 10609 WHEEL HOUSE CIRCLE STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL 33428** CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition HEIKEN, SCOTT NAME 3.2 NAME 2345 NE 199 ST STREET ADDRESS 3.3 STREET ADDRESS N MIAMI BEACH FL 33179 CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE 4.1 TITLE Change ____ Addition DELETE TABATCHNICK, DREW 4.2 NAME NAME 12101 NW 7TH ST 4.3 STREET ADDRESS STREET ADDRESS PLANTATION FL 33325 4.4 CITY-ST-ZIP CITY-ST-ZIP 5.1 TITLE TITLE DELETE Addition SILVER, STEVEN 5.2 NAME NAME 4302 ALTON RD SUITE 800 STREET ADDRESS 5.3 STREET ADDRESS MIAMI BEACH FL 33140 5.4 CITY-ST-ZIP CITY-ST-ZIP TITLE 6.1 TITLE DELETE Change Addition 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 14. 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 supplied ental 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 of the receiver of trustee employeered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears

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