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 #

P97000064169 (0)

Principal Place of Business	Mailing Addre
8944 NW 24TH TERR.	8944 NW 24T
ANALE FA CRASA	MALANA EL ANA

FILED May 27 1998 8:00am Secretary of State

GENE'	S CATERING INC.		,				
Principal Plac	e of Business	Mailing Address			T TO GRAND PLANT TO THE PORT OF THE PRINT OF	ANN BIRKI HIDI d b i	JAR IRIA I JE I
8944 NW 24TH TERR. 8944 NW 24TH TERR. MIAMI FL 33172 MIAMI FL 33172		DO NOT WRITE IN THI	S SPACE				
					3. Date Incorporated or Qualified	30.7.02	
					07/24/1997		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	l lai	pplied For
21		26			Applied For	Nr.	ot Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			6. Certificate of Status Desired		Additional
22		27			V. Certificate of Status Desired	Fee Re	equired
	City & State City & State				6. Election Campaign Financing		May Be
23	28			Trust Fund Contribution		to Fees	
Zip	Country	Zφ	Cou	ritry	8. This corporation owes or has paid the o		tangible No
24	9. Name and Address of Curr	29 rent Registered Agent	30		Personat Property Tax due June 30. 10. Name and Address of New Registers		7140
CII				81 Name			
SINGLETARY, EUGENE C 8944 NW 24TH TERR.							
	AMI FL 33172			82 Street Ac	ddress (P.O. Box Number is Not Acceptable)		
4411	WILL 20115			83			
			į	54 0:			
				84 City	F	85 Zip	Code
11. Pursuant	to the provisions of sector's 607.0	02 and 607 1508 Florida State	utes, the at	ove-named co	orporation submits this statement for the purpose ration's board of directors. I hereby accept the a		ts registered
office or i	registered agent or both. The Same familiar with dividing the control of the	ate of Florida. 29 Ti change was ligations of Section 607.6	authorized Torida Stat	d by the corpo ules.	ration's board of directors. I hereby accept the a	apointment as	registered
SIGNATURE.	1421 XII	us a let			4701	158	
SIGNATURE	Signature, thied or plinted have of released	apear to the rapplicable (NC		Agent signature re	guired when reinstating) DATE.	<u> </u>	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A		;
TITLE	B/D	DELETE	1.1 10			Change	1 7
NAME	EUGENE C. Single 8944 N.W. ZY Te	TARYIR	1.2 NA				
STREET ADDRESS	18944 N.W. 24 18	Rence	1	REET ADDRESS			إ
CITY-ST-ZIP	MiAmi, FloriDA	DELETE	1.4 CF 2.1 10	TY-ST-ZIP		Change	Addition
TITLE NAME		(Delete	2.1 10 2.2 NA			□ Citalitie	C Montion (
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP			1	TY-ST-ZIP	A**		
TITLE		DELETE	31111			Change	Addition
NAME			3.2 NA	ME			
STREET ADDRESS			3.3 ST	REET ADDRESS			1
CITY-ST-ZIP			3.4 CI	TY-ST-ZIP			
TITLE		DELETE	4.1 111	LE	100	Change	Addition
NAME			4.2 N/	AME			1
STREET ADDRESS			4.3 ST	REET ADDRESS			
CITY-ST-ZIP			4.4 CH	IY-ST-ZIP			
TITLE		☐ DELĒTE	5.1 T/T	LE		Change	Addition
NAME			5.2 NA	ME			
STREET ADDRESS			5.3 ST	REET ADDRESS		-	
CITY-ST-ZIP				FY-ST-ZIP			
TITLE		☐ DELETE	61717			☐ Change	Addition
NAME			6.2 NA	i			
STREET ADDRESS				REET ADDRESS			ľ
CITY-ST-ZIP	partiful that the information evention	buith this filing does not a walk.		Y-ST-ZIP	in Section 119 07/3Vi) Florida Statutos I further	cartify that the	information
indicated	on this annual report or supplied	otal animal tenoritis the and ac	roi tile exe nc⊯male an∩	that my signa	in Section 119.07(3)(i), Florida Statutes. I further ature shall have the same legal effect as if made	under oath: the	at I am an

officer or director of the corporation or the rece Block 12 or Block 13 if changed, or on an autom rt as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE: