

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2002 8:00 am
Secretary of State

04-30-2002 90229 013 ***150.00

DOCUMENT # P97000083970

1. Entity Name
VECCHIO CATERING, INC.

Principal Place of Business
3157 NORTH 34TH STREET
HOLLYWOOD FL 33021-4

Mailing Address
3157 NORTH 34TH STREET
HOLLYWOOD FL 33021-4



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Attn: Herman Moskowitz, CPA Suite, Apt. #, etc. 3850 Hollywood Blvd. Suite 204 City & State Hollywood, FL Zip 33021 Country USA		3. Mailing Address Suite, Apt. #, etc. 2765 Brickell Court City & State Miami, FL Zip 33129 Country USA	
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4. FEI Number 65-0792541
 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
~~VECCHIO, RICARHD M~~
3157 NORTH 34TH STREET
HOLLYWOOD FL 33021

7. Name and Address of New Registered Agent
 Name Richard M. Vecchio
 Street Address (P.O. Box Number is Not Acceptable)
2765 Brickell Court
 City Miami **FL** Zip Code 33129

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE Richard Vecchio, President **DATE** 4/17/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> Delete
NAME	VECCHIO, RICHARD M
STREET ADDRESS	3157 NORTH 34TH STREET
CITY-ST-ZIP	HOLLYWOOD FL 33021-4
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DIP/T/S <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Vecchio, Richard M. <i>in address</i>
STREET ADDRESS	2765 Brickell Court
CITY-ST-ZIP	Miami, FL 33129
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard Vecchio, President **DATE** 4/17/02 **Daytime Phone #** 305-858-7905
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

UNIFORM

CR2E034 (9/01)