

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000024406

Entity Name: CLUB CATERERS, INC.

FILED  
Apr 27, 2004  
Secretary of State

## Current Principal Place of Business:

600 SW 92 AVE.  
MIAMI, FL 33174

## New Principal Place of Business:

## Current Mailing Address:

5601 COLLINS AVENUE  
M-12  
MIAMI, FL 33140

## New Mailing Address:

FEI Number: 65-0911128      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CARRERA, ROSA MARIA  
5910 SW 8TH STREET  
MIAMI, FL 33144 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: CARRERAS, ROSA MARIA  
Address: 5910 SW 8TH STREET  
City-St-Zip: MIAMI, FL 33144

Title: DS ( ) Delete  
Name: ELIAS SANTOS, HAYDEE  
Address: 5910 SW 8TH STREET  
City-St-Zip: MIAMI, FL 33144

Title: DT ( ) Delete  
Name: ELIAS, ANHONY  
Address: 5910 SW 8TH STREET  
City-St-Zip: MIAMI, FL 33144

Title: DV ( ) Delete  
Name: MENENDEZ, RAMIRO R  
Address: 5910 SW 8TH STREET  
City-St-Zip: MIAMI, FL 33144

Title: DS ( ) Delete  
Name: TRUJILLO, HEIDI  
Address: 5910 SW 8TH STREET  
City-St-Zip: MIAMI, FL 33144

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROSA M. CARRERAS

DP

04/27/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date