

2003 **FOR PROFIT CORPORATION**
UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90193 035 ***150.00

DOCUMENT # P99000024406

1. Entity Name
 Club Caterers, Inc.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 600 S.W. 92 Avenue

3. Mailing Address
 5601 Collins Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

M-12

City & State

Miami, FL

City & State

Miami Beach, FL

Zip

Country

33174

Zip

Country

33140

4. FEI Number

65-0911128

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

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7. Name and Address of Current Registered Agent

Name

Carreras, Rosa Maria

Street Address (P.O. Box Number is Not Acceptable)

5910 S.W. 8 Street

City

Miami

FL

Zip Code

33144

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP	TITLE	
NAME	Carreras, Rosa Maria	NAME	
STREET ADDRESS	5910 S.W. 8 Street	STREET ADDRESS	
CITY-ST-ZIP	Miami, FL 33144	CITY-ST-ZIP	
TITLE	DS	TITLE	
NAME	Elias Santos, Haydee	NAME	
STREET ADDRESS	5910 S.W. 8 Street	STREET ADDRESS	
CITY-ST-ZIP	Miami, FL 33144	CITY-ST-ZIP	
TITLE	DT	TITLE	
NAME	Elias, Anthony	NAME	
STREET ADDRESS	5910 S.W. 8 Street	STREET ADDRESS	
CITY-ST-ZIP	Miami, FL 33144	CITY-ST-ZIP	
TITLE	DV	TITLE	
NAME	Menendez, Ramiro R	NAME	
STREET ADDRESS	5910 S.W. 8 Street	STREET ADDRESS	
CITY-ST-ZIP	Miami, FL 33144	CITY-ST-ZIP	
TITLE	DS	TITLE	
NAME	Trujillo, Heidi	NAME	
STREET ADDRESS	5910 S.W. 8 Street	STREET ADDRESS	
CITY-ST-ZIP	Miami, FL 33144	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 10 or on an attachment with an address, with all other like empowered

SIGNATURE:

[Signature]

Ramiro R. Menendez

Date: 4/26/03 Daytime Phone #

CR2E034B (12/02)