2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 08:00 AM
Secretary of State

ANNUAL REPORT				14p1 22, 2001 00:00			
DOCUMENT # P99000046978'				"	56	ecretary of	Stat
1. Entity Name GH FOOD SERVICES, INC.							
GH FOOI	D SERVICES, INC.						
Principal Plac	ce of Business	Mailing Address		1			
400 ENTRAD	DA DRIVE	8760 S.W. 160TH STREET					
HOLLYWOOD), FL 33021	<u>M</u> IAMI, FL 33157					
	<u> </u>		·····				
			01152004	No Chg-P	CR2E034 (10/03)		
DO NOT WRITE IN THIS SPACE			CE	4. FEI Numb		<u> </u>	lied For
_				65-092			Applicable
				5. Certificate	of Status Desired	\$8.75 Additi	onal
	6. Name and Address of Current Re	egistered Agent					
) WEITZEL,	AI AN		D0	NIOT W	nite.		
8760 S.W. 160TH STREET				טט	NOT W	KIIE	
MIAMI, FL 33157				IN 7	THIS SP	ACE	
	a named entity submits this statement for t	he purpose of changing its register	ed office or registe	red agent, or bo	th, in the State of Flo	rida. I am familiar with, ar	nd accept
the obligat	tions of registered agent.						
SIGNATURE			id Agent signature require	d when roinslating)		DATE	
FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.				00			
			Add	.00 May Be led to Fees	U000 0472970	00137394 4-80040-001_1	≤n ∩ ∩
10.	OFFICERS AND D	RECTORS	I -				
TATLE NAME	VP LOTTES, DAVID		1				
STREET ADDRESS	1						
CITY-ST-ZIP	PLANTATION, FL 33317		<u>l</u>				
TITLE NAME	P WEITZEL, ALAN					•	
STREET ADDRESS	I .						
CITY-ST-ZIP	MIAMI, FL 33157						
TATLE							
NAME STREET ADDRESS				БО.	NOT W		
CITY-ST-ZIP]	טט	NOT W	HIIE	
TITLE				IN T	THIS SF	ACE	
NAME STREET ADDRESS							
CITY-ST-ZIP			J				
TITLE			1			-	
NAME STREET ADDRESS							
City-St-zip							
TITLE			1				•
NAME	1		•				

12. Thereby certify that the information supplied with this litting 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 suppliemental 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Alan Writzel

4/24/04 305-251-7859

Daylime Phone #