

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Monham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 24 PM 3: 59

DOCUMENT # S75279

(7)

1. Corporation Name

CONTINENTAL CATERERS, INC.

Principal Place of Business

**13260 U.S. HIGHWAY 1
SEBASTIAN FL 32956-3750**

Mailing Address

**13260 U.S. HIGHWAY 1
SEBASTIAN FL 32956-3750**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/22/1991

3a. Date of Last Report

04/25/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

65-0283256

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under § 199.02,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**FURINO, BEN
13260 U.S. HIGHWAY 1
SEBASTIAN FL 32937**

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(Typed Registered Agent signature required when needed)

(Date)

12. OFFICERS AND DIRECTORS

TITLE	STD
NAME	FURINO, FRANK JR.
STREET ADDRESS	13260 U.S. HWY. ONE
CITY, ST, ZIP	SEBASTIAN FL
TITLE	PD
NAME	FURINO, BEN
STREET ADDRESS	13260 U.S. HWY. ONE
CITY, ST, ZIP	SEBASTIAN FL
TITLE	D
NAME	FURINO, ANTHONY
STREET ADDRESS	13260 U.S. HWY. ONE
CITY, ST, ZIP	SEBASTIAN FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 191.02(2)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 this corporation or the receiver or trustee empowered to execute this report as required by Chapter 191, Florida Statutes, and that my name appears in Block 12 or Block 13 or changed, or on an attachment with an address.

SIGNATURE:

Benny Furino
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/95 **407 3883438**
Date Telephone #