

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F01000006519

**FILED**  
**Oct 27, 2009**  
**Secretary of State**

**Entity Name:** OVATIONS FOOD SERVICES, INC.

**Current Principal Place of Business:**

18221 US HIGHWAY 41 NORTH  
LUTZ, FL 33549

**New Principal Place of Business:**

**Current Mailing Address:**

18221 US HIGHWAY 41 NORTH  
LUTZ, FL 33549

**New Mailing Address:**

**FEI Number:** 23-3035415

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WICKNER, TODD  
18221 US HIGHWAY 41 NORTH  
LUTZ, FL 33549 US

**Name and Address of New Registered Agent:**

WICKNER, TODD F  
18221 US HIGHWAY 41 NORTH  
LUTZ, FL 33549 US

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: TODD F. WICKNER

10/27/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: LUUKKO, PETER A  
Address: 3601 SOUTH BROAD STREET  
City-St-Zip: PHILADELPHIA, PA 19148

Title: VTD ( ) Delete  
Name: LIPSTEIN, SANFORD A  
Address: 3601 SOUTH BROAD STREET  
City-St-Zip: PHILADELPHIA, PA 19148

Title: SD (X) Delete  
Name: WEINBERG, PHILIP I  
Address: 3601 SOUTH BROAD STREET  
City-St-Zip: PHILADELPHIA, PA 19148

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSD (X) Change ( ) Addition  
Name: WEINBERG, PHILIP I  
Address: 3601 SOUTH BROAD STREET  
City-St-Zip: PHILADELPHIA, PA 19148

Title: VTD (X) Change ( ) Addition  
Name: HALBERT, JAY  
Address: 3601 SOUTH BROAD STREET  
City-St-Zip: PHILADELPHIA, PA 19148

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JAY HALBERT

D

10/27/2009

Electronic Signature of Signing Officer or Director

Date