

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000099538

FILED
Aug 04, 2004
Secretary of State

Entity Name: ROSA'S CAFE, INC.

Current Principal Place of Business:

1943 FOGGY RIDGE PARKWAY
LUTZ, FL 33559

New Principal Place of Business:

Current Mailing Address:

1943 FOGGY RIDGE PARKWAY
LUTZ, FL 33559

New Mailing Address:

FEI Number: 56-2294093

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURINO, ROSA
23739 POW WOW DRIVE
LUTZ, FL 33549 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

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: PT () Delete
Name: TURINO, ENRIQUE
Address: 6612 N. COOLIDGE AVENUE
City-St-Zip: TAMPA, FL 33614

Title: VS () Delete
Name: TURINO, ROSA
Address: 6408 AMUNDSON STREET
City-St-Zip: TAMPA, FL 33634

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 TURINO

VS

08/04/2004

Electronic Signature of Signing Officer or Director

_____ Date