


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2007 08:00 AM
Secretary of State

DOCUMENT # P04000128473

1. Entity Name
BUON APPETITO CAFE, INC.



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| Principal Place of Business 1125 SE 22ND STREET CAPE CORAL, FL 33990 | Mailing Address 1125 SE 22ND STREET CAPE CORAL, FL 33990 |
|--|--|

DO NOT WRITE IN THIS SPACE



01162007 No Chg-P CR2E034 (11/05)

| | |
|---|--|
| 4. FEI Number 61-1475969 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

CERVASIO, ALESSANDRO
1125 SE 22ND STREET
CAPE CORAL, FL 33990

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

UD00000613619
 02/05/07-80046-005 150.00

10. OFFICERS AND DIRECTORS

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD ERMMARINO, GABRIEL JR 1520 SW 53RD LANE CAPE CORAL, FL 33914 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | STD CERVASIO, ALESSANDRO 1125 SE 22ND STREET CAPE CORAL, FL 33990 |
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  **Alessandro Cervasio** **1/26/07** **239-433-0117**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #