

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000157305

FILED
Nov 08, 2006
Secretary of State**Entity Name:** THE ARGENTINIAN CROISSANT FACTORY, INC.**Current Principal Place of Business:**10281 W SAMPLE RD
CORAL SPRINGS, FL 33065**New Principal Place of Business:****Current Mailing Address:**10281 W SAMPLE RD
CORAL SPRINGS, FL 33065**New Mailing Address:****FEI Number:** 20-1912410**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LAVENA, JUAN O
12337 NW 52ND CT
CORAL SPRINGS, FL 33076 US**Name and Address of New Registered Agent:**LAVENA, ANA M
12337 NW 52ND CT
CORAL SPRINGS, FL 33076 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: ANA M LAVENA

11/08/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PTD () Delete
Name: LAVENA, JUAN O
Address: 12337 NORTHWEST 52ND COURT
City-St-Zip: CORAL SPRINGS, FL 33076**Title:** SVD (X) Delete
Name: LAVENA, ANA M
Address: 12337 NORTHWEST 52ND COURT
City-St-Zip: CORAL SPRINGS, FL 33076**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PTSD (X) Change () Addition
Name: LAVENA, ANA M
Address: 12337 NORTHWEST 52ND COURT
City-St-Zip: CORAL SPRINGS, FL 33076**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 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: ANA M LAVENA

PTSD

11/08/2006

Electronic Signature of Signing Officer or Director

Date