2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 24, 2008 08:00 A Secretary of State

1 2

1. Entity Name CAFE VICO, INC.			
Principat Place of Business	Mailing Address		T
1125 NORTH FEDERAL HIGHWAY FT LAUDERDALE, FL 33304 FORT LAUDERDALE, FL 33004			
		•	
DO NOT WE	ITE IN THIS SOA	^ =	03212008 No Chg-P CR2E034 (11/05)
DO NOT WRITE IN THIS SPACE		4. FEI Number Applied For 65-0742369 Not Applied	
			5. Certificate of Status Desired
6. Name and Address of C	urrent Registered Agent		
RODRIGUES, MARCOS A 20419 NE 10TH CT. NORTH MIAMI, FL 33179		:	DO NOT WRITE IN THIS SPACE
Ċ.			IN THIS STAGE
8. The above named entity submits this state the obligations of registered agent.	ment for the purpose of changing its register	ed office or register	red agent, or both, in the State of Florida. I am familiar with, and acco
SIGNATURE	100.5		d when (einstating) DATE
Signature, typed or printed name of registe	red agent and site if applicable. (NOTE: Registers	id Agent signature required	a ween reinstaurig) DATE
l .	1		I

A THUS

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00

DOCUMENT # P96000099085

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. **PSTD** TITLE RODRIGUEZ, MARCOS A NAME 20419 NE 10TH COURT STREET ADDRESS CITY-ST-ZIP NORTH MIAMI, FL 33179 TITLE NAME U00000869245 '09/08-80041-016 159.75 STREET ADDRESS CITY-ST-ZIP JITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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.

Codiques GNATURE AND TYPED OR PRINTED NAME OF SIGNING FICER OR DIRECTOR