2007 FOR PROFÍT CORPORATION ANNUAL REPORT

FILED Jan 24, 2007 08:00 A Secretary of State

AIIIVAN IIII VIII								
DOCUMENT # 390890 1. Entity Name RICARDO'S FAMOUS RESTAUL								
Principal Place of Business	Mailing Address							
1541 S. OCEAN BLVD., #305 POMPANO BEACH, FL 33062	1541 S. OCEAN BLVD, 305 Pompano Beach, Fl. 33062	US						

RICARDO'S FAMOUS RESTAURANTS, INC.							
Principal Place of Business Mailing Address 1541 S. OCEAN BLVD., #305 POMPANO BEACH, FL 33062 1541 S. OCEAN BLVD, 305 POMPANO BEACH, FL 33062 US DO NOT WRITE IN THIS SPACE			US				
			01192007 No Chg-P CR2E034 (11/05) 4. FEI Number				
6. Name and Address of Current Registered Agent MINIACI, DOMINICK F. P.A. 821 EAST BROWARD BOULEVARD FT. LAUDERDALE, FL. POMPANO BEACH, FL. 33301			DO NOT WRITE IN THIS SPACE				
	named entity submits this statement for the plants of registered agent.	ourpose of changing its registere	ed office or register	red agent, or both	n, in the State of Flor	rida, I am familiar with	, and accept
FIL	Signature, typed or printed name of registered agent and title E NOWIII FEE IS \$150.00 ny 1, 2007 Fee will be \$550.00	If applicable. (NOTE Registero 9. Election Campaign Finar Trust Fund Contribution.		.00 May Be		DATE	
10. TITLE NAME	OFFICERS AND DIRE PTS KARP, RICHARD	CTORS			1 95050	000600405	~. ,
STREET ADDRESS City-St-Zip Title	1541 S OCEAN BLVD #305 POMPANO BEACH, FL 00000,				01/26/	07-80008-01	2 150.00
NAME STREET ADDRESS CITY-SI-ZIP	,						
TITLE NAME STREET ADDRESS CITY-ST-ZIP		1.00		DO	NOT W	RITE	a series de la constitución de l
TITLE Name Street address City-St-Zip				IN 7	THIS SP	ACE	Vorint control of the
TITLE NAME STREET ADDRESS CITY-ST-ZIP				-			
TITLE Name Street address City-St-Zip							Miles and a Period Period Andrews Andrews
12. I hereby of indicated	certify that the information supplied with this on this report or supplemental report is true	iling does not qualify for the ex and accurate and that my signa	emptions contained ture shall have the	d in Chapter 119, same legal effect	, Florida Statutes. I t as if made under o	further certify that the ath; that I am an office	information or or director

عدم معدم عدد المعالية والمعالمة على المعالمة على المعالمة على المعالمة على المعالمة على المعالمة على المعالمة والمعالمة المعالمة والمعالمة المعالمة والمعالمة المعالمة المعالمة المعالمة والمعالمة والمعالمة المعالمة المعالمة والمعالمة المعالمة ال of the corporation or the recei-changed, or on an attachment

SIGNATURE:

Daytime Phone #