2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2007
Secretary of State

DOCUMENT# F00000001649

Entity Name: CAFE BRITT CORPORATION

Current Principal Place of Business:

3785 N.W. 82ND AVENUE., #109
MIAMI, FL 33166

New Principal Place of Business:

3785 N.W. 82ND AVENUE., #109
DORAL, FL 331666629

Current Mailing Address:

3785 N.W. 82ND AVENUE., #109
MIAMI, FL 33166

New Mailing Address:

3785 N.W. 82ND AVENUE., #109
DORAL, FL 331666629

FEI Number: 58-2450643 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATE CREATIONS ENTERPRISES, INC.
941 FOURTH STREET #200
MIAMI BEACH, FL 33139 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ARONSON, STEVE J
Address: 3785 NW 82 AVE, SUITE 109
City-St-Zip: MIAMI, FL 3316629

Title: SD ( ) Delete
Name: VARGAS, PABLO I
Address: 3785 NW 82 AVE, SUITE 109
City-St-Zip: MIAMI, FL 331666629

Title: TD ( ) Delete
Name: GROISMAN, GUILLERMO
Address: 3785 NW 82 AVE, SUITE 109
City-St-Zip: MIAMI, FL 331666629

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: ARONSON, STEVE J
Address: 3785 NW 82 AVE, SUITE 109
City-St-Zip: DORAL, FL 331666629

Title: SD (X) Change ( ) Addition
Name: VARGAS, PABLO I
Address: 3785 NW 82 AVE, SUITE 109
City-St-Zip: DORAL, FL 331666629

Title: TD (X) Change ( ) Addition
Name: GROISMAN, GUILLERMO
Address: 3785 NW 82 AVE, SUITE 109
City-St-Zip: DORAL, FL 331666629

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: STEVE ARONSON PD 03/21/2007

Electronic Signature of Signing Officer or Director Date