

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 08, 2004 08:00 AM
Secretary of State

DOCUMENT # G40590		
1. Entity Name: ANGELO BUFFET, INC.		
Principal Place of Business: C/O ANGEL REQUEJADO 6013 S.W. 8TH STREET MIAMI, FL 33144	Mailing Address: C/O ANGEL REQUEJADO 6013 S.W. 8TH STREET MIAMI, FL 33144	
DO NOT WRITE IN THIS SPACE		



07012004 No Chg-P CR2L034 (10/03)

4. Fict Number 59-2301025	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

B. Name and Address of Current Registered Agent: REQUEJADO, ANGEL 5700 SW 51 STREET MIAMI, FL 33155		DO NOT WRITE IN THIS SPACE
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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.

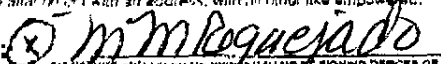
SIGNATURE: _____ (Signature of registered agent and the filer, if not the registered agent)	DATE: _____ (Date of filing)
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees in accordance with s. 607.103(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
101 NAME STREET ADDRESS CITY, ST, ZIP 102 NAME STREET ADDRESS CITY, ST, ZIP 103 NAME STREET ADDRESS CITY, ST, ZIP 104 NAME STREET ADDRESS CITY, ST, ZIP 105 NAME STREET ADDRESS CITY, ST, ZIP 106 NAME STREET ADDRESS CITY, ST, ZIP	DPGV MARTIN, MARTHA 5700 SW 51 STREET MIAMI, FL 33155

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07/08/04-80019-020 158.75

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption specified in Section 119.07(3)(d), 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 or changed on a prior filing of 1 with an address, title, or other like information.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/1/04
Date

Notary Public