

**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # L02000025802**

1. Entity Name  
**CAFE CARDOZO, LLC**



Principal Place of Business  
**420 JEFFERSON AVE.  
MIAMI BEACH, FL 33139**

Mailing Address  
**420 JEFFERSON AVE.  
MIAMI BEACH, FL 33139**



04152004 No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**56-2295351**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**INTRASTATE REGISTERED AGENT CORPORATION  
701 BRICKELL AVE., STE. 3000  
MIAMI, FL 33131**

**DO NOT WRITE  
IN THIS SPACE**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when renewing)

DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2004**

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGR
NAME	ESTEFAN, EMILIO JR
STREET ADDRESS	420 JEFFERSON AVE
CITY-ST-ZIP	MIAMI BEACH, FL 33139

TITLE	
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CITY-ST-ZIP	

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CITY-ST-ZIP	

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IN THIS SPACE**

U00000145565  
03/03/04-80035-008 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Emilio Estefan **Emilio Estefan**

4/23/04 **(305) 695-7000**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #