

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L52038

Entity Name: LAS OLAS CAFE, INC.

FILED  
Jan 06, 2004  
Secretary of State

**Current Principal Place of Business:**

922 E. LAS OLAS BLVD.  
FT. LAUDERDALE, FL 33301

**New Principal Place of Business:**

**Current Mailing Address:**

922 E. LAS OLAS BLVD.  
FT. LAUDERDALE, FL 33301

**New Mailing Address:**

FEI Number: 59-2997842

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ITKIN, PERRY S ESQ.  
106 S.E. 9TH STREET  
FT. LAUDERDALE, FL 33316 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: PACE, PAULA  
Address: 6150 NE 33RD TERRACE  
City-St-Zip: FT LAUDERDALE, FL 33309

Title: VPD ( ) Delete  
Name: MYERS, DIANE  
Address: 440 NE 8TH AVE  
City-St-Zip: FT LAUDERDALE, FL 33301

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PAULA PACE

PD

01/06/2004

Electronic Signature of Signing Officer or Director

Date