

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L64446

Entity Name: CESTA PIZZERIA, INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

% JAVIER ARRIAGA
3935 N U.S. #1, STE. A & B
COCOA, FL 32926 US

New Principal Place of Business:

Current Mailing Address:

% JAVIER ARRIAGA
3935 N U.S. #1, STE. A & B
COCOA, FL 32926 US

New Mailing Address:

FEI Number: 59-3009402

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARRAIGA, JAVIER
3935 N. U.S. #1
SUITE A & B
COCOA, FL 32926 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: VST () Delete
Name: ARRAIGA, CHARLENE A.
Address: 3800 DAKOTA AVENUE
City-St-Zip: COCOA, FL 32926

Title: PD () Delete
Name: ARRAIGA, JAVIER
Address: 3800 DAKOTA AVENUE
City-St-Zip: COCOA, FL 32926

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 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: CHARLENE A. ARRIAGA

VST

04/30/2009

Electronic Signature of Signing Officer or Director

Date