2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 30, 2004
Secretary of State

DOCUMENT# L66757

Entity Name: ROCCO'S CAFE INC.

Current Principal Place of Business:

5688 CYPRESS GARDENS BLVD
WINTER HAVEN, FL 33884

New Principal Place of Business:

15 W. UNIVERSITY AVE.
GAINESVILLE, FL 32605 US

Current Mailing Address:

5688 CYPRESS GARDENS BLVD
WINTER HAVEN, FL 33884

New Mailing Address:

3505 NW 17TH ST.
GAINESVILLE, FL 32605 US

FEI Number: 59-3005349 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MONTELEONE, ROCCO
224 HERNANDO ROAD
WINTER HAVEN, FL 33884 US

Name and Address of New Registered Agent:

MONTELEONE, ROCCO
3505 NW 17 STREET
GAINESVILLE, FL 32605 US

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: ROCCO MONTELEONE 09/30/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MONTELEONE, ROCCO
Address: 224 HERNANDO ROAD
City-St-Zip: WINTER HAVEN, FL 33884

Title: TSD ( ) Delete
Name: MONTELEONE, JOSEPHINE
Address: 160 VALENCIA DRIVE
City-St-Zip: WINTER HAVEN, FL 33884

Title: VPD ( ) Delete
Name: MONLELONE, CHERYL
Address: 725 AVE M SE
City-St-Zip: WINTER HAVEN, FL 33880

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: CHERYL MONTELEONE VPD 09/30/2004
Electronic Signature of Signing Officer or Director Date