


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

1/1

FILED
Feb 22, 2007 8:00 am
Secretary of State

01-18-2007 90090 041 ***150.00

DOCUMENT # M34079 1. Entity Name FANTASTIC RESTAURANT, INC.	
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Principal Place of Business 701 W. HALLANDALE BEACH BLVD. HALLANDALE, FL 33009	Mailing Address 701 W. HALLANDALE BEACH BLVD. HALLANDALE, FL 33009
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DO NOT WRITE IN THIS SPACE



01112007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2962521	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

ORTEGA, MIGUEL
220 SW 2ND AVE.
HALLANDALE, FL 33009

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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  DATE 01/11/2007

Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reissuing)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ORTEGA, MIGUEL 220 SW 2ND AVE. HALLANDALE, FL 33009
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE  Miguel Ortega President 02/12/07 (954) 454-7111

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #