

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M41141

FILED
Apr 20, 2009
Secretary of State

Entity Name: MEDLEY RESTAURANT & CAFETERIA, INC.

Current Principal Place of Business:

7441 N.W. 72ND AVE.
MEDLEY, FL 331662432

New Principal Place of Business:

Current Mailing Address:

7441 N.W. 72ND AVE.
MEDLEY, FL 331662432

New Mailing Address:

FEI Number: 59-2746090 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VELAZQUEZ, GEOVANI
3388 WEST 73 TERRACE
HIALEAH, FL 33016 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: VP/T () Delete
Name: VALAZQUEZ, GEOVANE
Address: 3388 W 73 TR
City-St-Zip: HIALEAH, FL 33018 US

Title: P () Delete
Name: VALAZQUEZ, MARIA E
Address: 9762 NW 129 TR
City-St-Zip: HIALEAH GARDEN, FL 33018

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP/T (X) Change () Addition
Name: VALAZQUEZ, GEOVANI
Address: 3388 W 73 TR
City-St-Zip: HIALEAH, FL 33018 US

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: MARIA VELAZQUEZ

P

04/20/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date