

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Sep 25, 2007**  
**Secretary of State**

DOCUMENT# N03000007723

Entity Name: CASA DE RESTAURACION INC.

**Current Principal Place of Business:**1953 S. MILITARY TRAIL  
WEST PALM BEACH, FL 33415**New Principal Place of Business:**770- S SOUTH MILITARY TRAIL  
SUITE S  
WEST PALM BEACH, FL 33415 US**Current Mailing Address:**1953 S. MILITARY TRAIL  
WEST PALM BEACH, FL 33415**New Mailing Address:**770- S SOUTH MILITARY TRAIL  
SUITE S  
WEST PALM BEACH, FL 33415 US

FEI Number: 30-0214218

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**ARROYO, RUBEN DR.  
198 EVERGRENE PARKWAY  
PALM BEACH GARDENS, FL 33410 US**Name and Address of New Registered Agent:**ARROYO, RUBEN DR.  
3172 TURTLE COVE  
WEST PALM BEACH, FL 33411 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:

09/25/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: DP ( ) Delete  
Name: ARROYO, RUBEN  
Address: 3172 TURTLE COVE  
City-St-Zip: WEST PALM BEACH, FL 33411Title: DV ( ) Delete  
Name: ALVAREZ, FRANK  
Address: 236 SANDPIPER AVENUE  
City-St-Zip: ROYAL PALM BEACH, FL 33411Title: DS ( ) Delete  
Name: MENDEZ, AVELINO  
Address: 4044 SANDRA LANE  
City-St-Zip: WEST PALM BEACH, FL 33406Title: DT ( ) Delete  
Name: PEREZ, RAYNEE  
Address: 1953 S. MILITARY TRAIL  
City-St-Zip: WEST PALM BEACH, FL 33415**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:Title: DT (X) Change ( ) Addition  
Name: PEREZ, RAYNEE  
Address: 770- S SOUTH MILITARY TRAIL  
City-St-Zip: WEST PALM BEACH, FL 33415 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAYNEE PEREZ

DT

09/25/2007

Electronic Signature of Signing Officer or Director

Date