-2008 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # P00000016272

CAFE CONTINENTAL - FLORIDA, INC.



FILED Apr 21, 2008 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

1590 FIRST ST

SARASOTA, FL 34236-8502 US

1590 FIRST ST SARASOTA, FL 34236-8502 US



DO	NOT	WRITE	IN	THIS	SPA	CF
	1101		11.4	11110	\mathbf{v}	\sim \sim

04172008 No Chg-P CR2E034 (11/05) Applied For 4. FEI Number 65-1004396 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

941-366-6380

6. Name and Address of Current Registered Agent

ENDRISS, JAMES W 1590 FIRST ST SARASOTA, FL 34236-8502

SIGNATURE:

DO NOT WRITE 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									
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees			U00000909252 05/06/08-80063-014 150.00				
10.	OFFICERS AND DIRECTORS								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT STROUD, IAN J 1590 FIRST STREET SARASOTA, FL 342368502								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ENDRISS, JAMES W 1590 FIRST STREET SARASOTA, FL 342368502								
TITLE NAME STREET ADDRESS CITY-ST-ZIP			1	DO	NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
TITLE NAME									
STREET ADDRESS CITY-ST-ZIP									
12. I hereby certify that the information supplied with this filling 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.									

TED NAME OF SIGNING OFFICER OR DIRECTOR