


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 20, 2004 08:00 AM**  
**Secretary of State**


DOCUMENT # P00000103056  
1. Entity Name  
RICKY'S CAFE, INC.



Principal Place of Business  
1902 US HWY 92W  
AUBURNDALE, FL 33823

Mailing Address  
1902 US HWY 92W  
AUBURNDALE, FL 33823

**DO NOT WRITE IN THIS SPACE**



04152004 No Chg-P CR2E034 (10/03)

4. FEI Number  
59-3668725

5. Certificate of Status Desired  \$8.75 Additional Fee Required

Applied For  
Not Applicable

6. Name and Address of Current Registered Agent

DEMOYA, CAROL  
1902 US HWY 92W  
AUBURNDALE, FL 33823

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	DEMOYA, RICARDO
STREET ADDRESS	1902 US HWY 92W
CITY - ST - ZIP	AUBURNDALE, FL 33823
TITLE	VT
NAME	DEMOYA, CAROL
STREET ADDRESS	1902 US HWY 92W
CITY - ST - ZIP	AUBURNDALE, FL 33823
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

000000121602  
04/20/04-80060-010 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Ricardo Demoya RICARDO I. DEMOYA 4/15/04 863-965-3653  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #