2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2005 08:00 AM
Secretary of State

DOCUMENT # P01000018039

1. Entity Name
DAREBECAFE INVESTMENT CORP.

Principal Place of Business	Mailing Address
3380 S. MILITARY TRAIL LAKE WORTH, FL 33463	3380 S. MILITARY TRAIL LAKE WORTH, FL 33463

01042005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1083510
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GIL, RENE
3380 S. MILITARY TRAIL
LAKE WORTH, FL 33463

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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, 2005 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GIL, CARLOS ALBERTO
STREET ADDRESS	3380 S. MILITARY TRAIL
CITY-ST-ZIP	LAKE WORTH, FL 33463
TITLE	VPD
NAME	GIL, RENE
STREET ADDRESS	3380 S. MILITARY TRAIL
CITY-ST-ZIP	LAKE WORTH, FL 33463
TITLE	S
NAME	GIL, BEATRIZ E
STREET ADDRESS	3380 S. MILITARY TRL
CITY-ST-ZIP	LAKE WORTH, FL 33463
TITLE	S
NAME	GIL, DAVID
STREET ADDRESS	3380 S. MILITARY TRL
CITY-ST-ZIP	LAKE WORTH, FL 33463
TITLE	S
NAME	GIL, CARLOS
STREET ADDRESS	3380 S. MILITARY TRL
CITY-ST-ZIP	LAKE WORTH, FL 33463
TITLE	S
NAME	GIL, FELIPE
STREET ADDRESS	3380 S. MILITARY TRL
CITY-ST-ZIP	LAKE WORTH, FL 33463

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01/19/05-80071-005 150.00

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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: Carlos Gil 01/05/05 5614344149
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #