

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000059850

1. Entity Name  
KRISTINA'S CAFE, INC.



Principal Place of Business  
3590 - 34TH STREET NORTH  
ST PETERSBURG, FL 33713

Mailing Address  
3590 - 34TH STREET NORTH  
ST PETERSBURG, FL 33713

**FILED**  
**Aug 11, 2008 08:00 AM**  
**Secretary of State**



07142008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3729458**

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

NIKAJ, KOZETA  
3590 - 34TH STREET NORTH  
ST PETERSBURG, FL 33713

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

TITLE	PST
NAME	NIKAJ, KOZETA
STREET ADDRESS	5790 60TH AVE N
CITY-ST-ZIP	SAINT PETERSBURG, FL 33709
TITLE	VP
NAME	GZIM, RRALLA
STREET ADDRESS	5790 60TH AVE N
CITY-ST-ZIP	SAINT PETERSBURG, FL 33709
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000957466  
08/11/08-80001-017 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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

SIGNATURE: *Kozeta Rozalla*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*President 8/8/08*

Date Daytime Phone #