

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2007 08:00 A
Secretary of State

DOCUMENT # P02000008716

1. Entity Name
COCO'S CORNER CAFE INC.



Principal Place of Business
1200 S. PINE ISLAND RD.
148
PLANTATION, FL 33324

Mailing Address
1200 S. PINE ISLAND RD.
148
PLANTATION, FL 33324



02182007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
45-0464076

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

DOMINGUEZ, JORGE A
3906 PINEWOOD LANE
HOLLYWOOD, FL 33021

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 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 DOMINGUEZ, JORGE A
STREET ADDRESS 3906 PINEWOOD LANE
CITY-ST-ZIP HOLLYWOOD, FL 33021

TITLE VD
NAME DOMINGUEZ, SEBASTIAN J
STREET ADDRESS 3906 PINEWOOD LANE
CITY-ST-ZIP HOLLYWOOD, FL 33021

TITLE SD
NAME DOMINGUEZ, J. BLANCA
STREET ADDRESS 4330 HILLCREST DR. #302
CITY-ST-ZIP HOLLYWOOD, FL 33021

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000646757
03/06/07-80044-017 150.00

**DO NOT WRITE
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: J. BLANCA DOMINGUEZ 2/19/07 954-423-2359
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #