
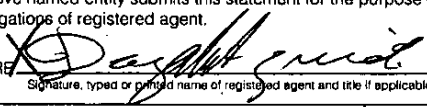
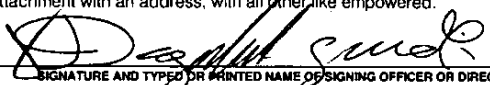


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 13, 2005 8:00 am**  
**Secretary of State**

04-13-2005 90032 004 \*\*\*150.00

<b>DOCUMENT # P02000025719</b> 1. Entity Name <b>MAMA'S LATIN CAFE, INC.</b>																													
Principal Place of Business <b>431 SOUTHLAND SHOPPING CENTER SR84 FT. LAUDERDALE, FL 33315</b>			Mailing Address <b>431 SOUTHLAND SHOPPING CENTER SR84 FT. LAUDERDALE, FL 33315</b>																										
2. Principal Place of Business <b>1015 W St Rd 84</b> Suite, Apt. #, etc.		3. Mailing Address <b>1015 W St Rd 84</b> Suite, Apt. #, etc.																											
City & State <b>Fort Lauderdale, FL</b>		City & State <b>Fort Lauderdale, FL</b>		4. FEI Number <b>APPLIED FOR</b>																									
Zip <b>33315</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>																									
6. Name and Address of Current Registered Agent  <b>GUIDO, ALFREDO 431 SOUTHLAND SHOPPING CTR SR 84 FT LAUDERDALE, FL 33315</b>			7. Name and Address of New Registered Agent Name <b>Alfredo Guido</b> Street Address (P.O. Box Number is Not Acceptable) <b>1015 W St. Rd 84</b> City <b>Ft Laud.</b> <b>FL</b> Zip Code <b>33315</b>																										
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:																													
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>																											
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">NAME</td> <td style="width:20%; text-align: right;">Delete</td> </tr> <tr> <td>NAME</td> <td><b>GUIDO, ALFREDO</b></td> <td><input type="checkbox"/></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"><b>431 SOUTHLAND SHOPPING CENTER SR84</b></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td colspan="2"><b>FT. LAUDERDALE, FL 33315</b></td> </tr> </table>			TITLE	NAME	Delete	NAME	<b>GUIDO, ALFREDO</b>	<input type="checkbox"/>	STREET ADDRESS	<b>431 SOUTHLAND SHOPPING CENTER SR84</b>		CITY - ST - ZIP	<b>FT. LAUDERDALE, FL 33315</b>		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">NAME</td> <td style="width:20%; text-align: right;">Change Addition</td> </tr> <tr> <td>NAME</td> <td><b>1015 W. St Rd 84</b></td> <td><input checked="" type="checkbox"/> <input type="checkbox"/></td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2"><b>Ft. Lauderdale, Fla.</b></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td colspan="2"><b>33315</b></td> </tr> </table>			TITLE	NAME	Change Addition	NAME	<b>1015 W. St Rd 84</b>	<input checked="" type="checkbox"/> <input type="checkbox"/>	STREET ADDRESS	<b>Ft. Lauderdale, Fla.</b>		CITY - ST - ZIP	<b>33315</b>	
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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:  <b>4/05/05</b> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #																													