

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000033169

FILED
Jul 06, 2007
Secretary of State

Entity Name: MARCOS ISLAND CUBAN CAFE INC.

Current Principal Place of Business:

4110 ENTERPRISE AVENUE
UNIT 101
NAPLES, FL 34104

New Principal Place of Business:

Current Mailing Address:

4110 ENTERPRISE AVENUE
UNIT 101
NAPLES, FL 34104

New Mailing Address:

FEI Number: 01-0656202 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOTO, LAURA
4110 ENTERPRISE AVENUE
UNIT 101
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TEJEDA, NILO
Address: 3146 S.W. 23RD STREET
City-St-Zip: MIAMI, FL 33145

Title: STD () Delete
Name: SOTO, LAURA
Address: 3146 S.W. 23RD STREET
City-St-Zip: MIAMI, FL 33145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAURA SOTO

VP

07/06/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date