


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 14, 2006 8:00 am
Secretary of State

07-14-2006 90025 003 ***158.75

DOCUMENT # P02000064458 1. Entity Name LATIN AMERICAN CAFE' & MARKET INC.					
Principal Place of Business 3780 TAMPA ROAD OLDSMAR, FL 34677			Mailing Address 3780 TAMPA ROAD OLDSMAR, FL 34677		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
PAGANI, ALBERTO 3780 TAMPA ROAD OLDSMAR, FL 34677			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PAGANI, ALBERTO		NAME		
STREET ADDRESS	3780 TAMPA ROAD		STREET ADDRESS		
CITY-ST-ZIP	OLDSMAR, FL 34677		CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<div style="display: flex; justify-content: space-between;"> 7/11/06 813.855-0332 </div> <small>Date Daytime Phone #</small>		

ATTACHMENT
20048948

Latin American Grill
Argentinian Steakhouse

July 11th.,2006

Ref.:P02000064458
Letter # 006A00043272

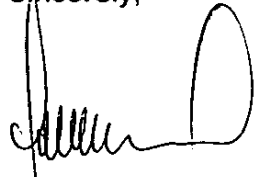
Dear Madam or Sir;

I have received your letter with the return check, you also request a penalty of \$400.00 for a late fee, I don't think that this applied to my corporation, that I send a check on time, the only thing I didn't sent was the form, because I never received such information. So, I'm asking you please, waive those charges againts my corporation.

I'm attaching the check for \$158.75, and the signed document.

Hope you will understand.

Sincerely,



Alberto Pagani
President

3780 Tampa Rd., Oldsmar,Fl. 34677 - Ph.813.855.0332