

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000090879

Entity Name: CALYPSO CAFE INC

FILED
Jul 07, 2005
Secretary of State

Current Principal Place of Business:

904 GAMBLE ST.
TALLAHASSEE, FL 32310

New Principal Place of Business:

Current Mailing Address:

904 GAMBLE ST
TALLAHASSEE, FL 32310

New Mailing Address:

FEI Number: 59-3475544

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SERANEAU, PATRICIA
4744 GRENABLE BLVD
TALLAHASSEE, FL 32302 US

Name and Address of New Registered Agent:

SERANEAU, PATRICIA
904 GAMBLE ST
TALLAHASSEE, FL 32310 US

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: PATRICIA SERANEAU

07/07/2005

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: O () Delete
Name: SERANEAU, DEBORAH
Address: 61 S. WALDINGER ST.
City-St-Zip: VALLEY STREAM, NY 11580

Title: MGR () Delete
Name: SERANEAU, NIGEL
Address: 4741 FLANDERS AVE.
City-St-Zip: TALLAHASSEE, FL 32310

Title: OMGR () Delete
Name: SERANEAU, GAIL
Address: 9730 FLATLANDS AVE.
City-St-Zip: BROOKLYN, NY 11236

Title: O () Delete
Name: SERANEAU, MAUREEN
Address: 9730 FLATLANDS AVE.
City-St-Zip: BROOKLYN, NY 11236

Title: MGR () Delete
Name: SERANEAU, DION
Address: 4741 FLANDERS AVE.
City-St-Zip: TALLAHASSEE, FL 32310

Title: MGR () Delete
Name: SERANEAU, PATRICIA
Address: 4741 FLANDERS AVE.
City-St-Zip: TALLAHASSEE, FL 32310

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: OMGR (X) Change () Addition
Name: SERANEAU, GAIL
Address: 9730 FLATLANDS AVE.
City-St-Zip: BROOKLYN, NY 11236

Title: O (X) Change () Addition
Name: SERANEAU, MAUREEN
Address: 9730 FLATLANDS AVE.
City-St-Zip: BROOKLYN, NY 11236

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 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 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: PATRICIA SERANEAU

MGR

07/07/2005

Electronic Signature of Signing Officer or Director

Date