

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000100903

FILED
Apr 26, 2004
Secretary of State

Entity Name: LISBOA ANTIGA RESTAURANT, CORPORATIOON

Current Principal Place of Business:

1303 SW 22 STREET
MIAMI, FL 33175

New Principal Place of Business:

Current Mailing Address:

236 ROMANO AVENUE
CORAL GABLES, FL 33134

New Mailing Address:

5300 N W 33 AVENUE
STE 117
FORT LAUDERDALE, FL 33309

FEI Number: 56-2293228

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTOS, FERNANDO A
236 ROMANO AVENUE
CORAL GABLES, FL 33134

Name and Address of New Registered Agent:

SERCHAY, ALLAN
5300 N W 33 AVENUE
STE 117
FORT LAUDERDALE, FL 33309

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: ALLAN SERCHAY

04/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: SANTOS, FERNANDO A
Address: 236 ROMANO AVENUE
City-St-Zip: CORAL GABLES, FL 33134

Title: PD () Delete
Name: BUZANELLI, ANTONIO
Address: 5300 NW 33 AVE STE 117
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: T () Delete
Name: SERCAY, ALLAN
Address: 5300 NW 33 AVE STE 117
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: BUZANELLI, ANTONIO
Address: 5300 NW 33 AVE STE 117
City-St-Zip: FORT LAUDERDALE, FL 33309

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

Title: VP/D () Change (X) Addition
Name: SAWAYA, PRISCILLA
Address: 5300 N W 33 AVENUE STE 117
City-St-Zip: FORT LAUDERDALE, FL 33309

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: ALLANSERCHAY

T

04/26/2004

Electronic Signature of Signing Officer or Director

Date