

2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED

05 APR 25 PM 6:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # P03000008739 1. Entity Name LA CUBANITA LATIN CAFE, INC.					
Principal Place of Business GULFVIEW SQUARE MALL 9409 U.S. HWY 19 PORT RICHEY, FL 34668 US			Mailing Address GULFVIEW SQUARE MALL 9409 U.S. HWY 19 PORT RICHEY, FL 34668 US		
2. Principal Place of Business 4903 State Rd 54 Suite, Apt. #, etc.		3. Mailing Address 4903 State Rd. 54 Suite, Apt. #, etc.		12152004 REIN-P CR2E098 (6/04)	
City & State New Port Richey FL		City & State FL		4. FEI Number 26399-0269 67-801246285	
Zip 34652		Country PASCO		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GARCIA, JOSE A GULFVIEW SQUARE MALL 9409 US HWY 19 PORT RICHEY, FL 34668				7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____	
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: <u><i>[Signature]</i></u> Signature of agent or officer/person of registered agent, and file if applicable. (NOTE: Registered Agent signature not used when reinstating)					
FILE NOW!!! FEE IS \$160.00 After January 1, 2005, Fee will be \$300.00				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P GARCIA, JOSE A 10114 REGENCY PARK BLVD. PORT RICHEY, FL 34668	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	300043537583 12/20/04--01070--016 **150.00	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP GARCIA, RAQUEL J 10114 REGENCY PARK BLVD. PORT RICHEY, FL 34668	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	200054207302 05/10/05--01046--004 **150.00	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(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: <u><i>[Signature]</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			12/15/04 Date		

When it may concern

I Jose A Garcia Owner and operation of La Cibranta Latin Cafe. did not received. Renewal
Please I request. a waiver fee I already had
sent 150.00 on Dec. 2004 But I never received
the letter that I put the wrong federal
Employer Id. number. until last week. the
Reason is that where my Business is located.
the are 3 more business in one. I'm sending 150-
dollars. Please excuse me for not returning it on
time I didnot abandoned this letter it feel
in wrong Business and put in a draw.

Rafael Garcia

My Quaker
727-847-7443