## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000018239

1. Entity Name GRANDMAS CAFE CORP.



**FILED** May 01, 2006 08:00 Al Secretary of State

CR2E034 (11/05)

Principal Place of Business

Mailing Address

17749 COLLINS AVE

SIGNATURE:

17749 COLLINS AVE

SUNNY ISLES BEACH, FL 33160 US

SUNNY ISLES BEACH, FL 33160

## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Applied For 4. FEI Number 04-3740383 Not Applicable

5. Certificate of Status Desired

04282006

\$8.75 Additional Fee Required

FUKSMAN, RAISA

## DO NOT WRITE

No Chg-P

17749 COLLINS AVE NORTH MIAMI BEACH, FL 33160			IN THIS SPACE		
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) CATE					
FILI After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10. TITLE	ÖFFICERS AND DIREC	TORS			
NAME	FUKSMAN, RAISA				
STREET ADDRESS	17749 COLLINS AVE				
CITY-ST-ZIP	SUNNY ISLES BEACH, FL 33160				
FITLE NAME					
STREET ADDRESS					
CITY-ST-ZIP					U00000552758 05/15/06:80024-007-150.00
THILE					05/15/06:"80024"001"150.00
NAME STREET ACCRESS					NOT WOITE
CITY-ST-ZIP				DO	NOT WRITE
TITLE				IN '	THIS SPACE
NAME				F 3 1	IIIO OI MOL
STREET ADDRESS					
City-ST-ZiP					e e
T-TLE NAME					
STREET ADDRESS		1			
CITY-ST-ZIP					
TITLE					
NAME STREET ADDRESS					
CITY-ST-ZIP		İ			
12. I hereby certify that the information supplied with this filiply 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					