


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

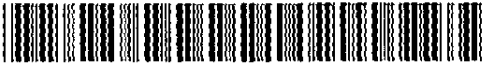
FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000062557
1. Entity Name
GOURMET CAFE'S & BISTRO'S UNLIMITED, INC.



Principal Place of Business Mailing Address
5768 STAG THICKET LANE **5768 STAG THICKET LANE**
PALM HARBOR, FL 34685 **PALM HARBOR, FL 34685**

DO NOT WRITE IN THIS SPACE



03132006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
20-0031065 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
PERGOLA, PETER F
5768 STAG THICKET LANE
PALM HARBOR, FL 34685

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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PERGOLA, PETER F 5768 STAG THICKET LANE PALM HARBOR, FL 34685
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PERGOLA, ANGELA M 5768 STAG THICKET LANE PALM HARBOR, FL 34685
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05/05/06-80001-016 150.00

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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: Peter F. Pergola Date: 3/14/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #