

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000095866

FILED
May 28, 2008
Secretary of State

Entity Name: DONA GOYA - CUBAN CAFETERIA, INC.

Current Principal Place of Business:

522 JOEL BLVD
UNIT A
LEHIGH ACRES, FL 33972

New Principal Place of Business:

Current Mailing Address:

522 JOEL BLVD UNIT A
LEHIGH ACRES, FL 33972

New Mailing Address:

522 JOEL BLVD
UNIT A
LEHIGH ACRES, FL 33972

FEI Number: 20-0191456

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VILA, LIEN
719 SHADY SIDE STREET
LEHIGH ACRES, FL 33936 US

Name and Address of New Registered Agent:

SANCHEZ, IDARMIS
520 PARKSIDE STREET
LEHIGH ACRES, FL 33936 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: IDARMIS SANCHEZ

05/28/2008

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: P () Delete
Name: SANCHEZ, I DARMIS
Address: 520 PARK SIDE STREET
City-St-Zip: LEHIGH ACRES, FL 33936

Title: V () Delete
Name: VILA, LIEN
Address: 719 SHADY SIDE STREET
City-St-Zip: LEHIGH ACRES, FL 33936

Title: S () Delete
Name: RODRIGUEZ, GERARDO
Address: 719 SHADY STREET
City-St-Zip: LEHIGH ACRES, FL 33936

Title: T (X) Delete
Name: GARCIA, JOSE A
Address: 520 PARKSIDE STREET
City-St-Zip: LEHIGH ACRES, FL 33936

Title: S (X) Delete
Name: GARCIA, JOSE R
Address: 520 PARKSIDE STREET
City-St-Zip: LEHIGH ACRES, FL 33936

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: RODRIGUEZ, GERARDO
Address: 719 SHADY STREET
City-St-Zip: LEHIGH ACRES, FL 33936

Title: S (X) Change () Addition
Name: GARCIA, JOSE R
Address: 520 PARKSIDE STREET
City-St-Zip: LEHIGH ACRES, FL 33936

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 exemption stated 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 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: IDARMIS SANCHEZ

P

05/28/2008

Electronic Signature of Signing Officer or Director

Date