2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 03, 2004 8:00 am Secretary of State 05-03-2004 91009 022 ***150.00

	MENT # P03000109	9311									
1. Entity Name DANIELLE	'S CAFE INC.	,	` - _m ,	M							
Principal Place	of Rusinosa	, , , , , , , , , , , , , , , , , , ,	í Address	·	-	-				-	
Principal Place of Business Mailing Address 181 FEDERAL HWY 181 FEDERAL HWY									24067	561	
TEQUESTA, FL	_ 33469	TEQU	ESTA, FL 33469						1001		
2 Principal Pla	ace of Business	3 Maili	ng Address					123			
2055 S.W. Egroe Ave. 2655 S.W. Fen					Ne.			HAJAN IIIII HAIRI HER	60161 411 06216	8)88 f)/81 11881 f14	
Suite, Apt. #	, Apt. #, etc.				04302004	Chg-P	CR2E	034 (10/03)			
			city & State				4. FEI Numbe 05-058				plied For at Applicable
Palm C	Country	· Zip	U 1	Country				of Status Desire			
<u>34990</u>	6. Name and Address of Current		990					Address of Ne			d
					lame						****
CHASSANG, DANIELLE F 1754 S. W. COLLEGE ST					Street Address (P.O. Box Number is Not Acceptable)						
STUART, F	L 34997		•	-						-	 -
	• • • •				City				FI	Zip Cod	e
8. The above	named entity submits this statement f	or the purpo	ose of changing its re	egistered o	office or re	gister	ed agent, or bo	th, in the State of	f Florida Lam	familiar with.	and accept
the obligation	ons of registered agent.		r Visitalia di Santa				الدين بن الدين ما مستحد		\$ 15° 11 ×5° 4 	e de la lace de la lac La lace de la lace de	
SIGNATURE_	Signature, typed or printed name of registered agen		licable. (NDTE: F	Registered Ag	ent signature r	required	when reinstating)		DATE		
MARIEL I					1					്ന ഗ്രജ് s	DIVAGE
on, FILE	E NOW!!! FEE IS \$150.00 ly.1, 2004 Fee will be \$550		9. Election Campaign Trust Fund Contrib			\$5. Add	.00 May Be ed to Fees		De La Maria Para de La desar 199		
-10.	OFFICERS AND	DIRECTO		11.			ADDITIONS	/CHANGES TO	OFFICERS AN		
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* NAME :- Street address *	and the same of the Australia		int in the	NAME STREET A	ADDRESS		i e more. Nedý		مستحد مستعد ال ان المالي المالية ما مساوية		n han dan dan dan ber
CITY-ST-ZIP				CITY-ST	-ZIP						
12. I hereby of the core	certify that the information supplied with on this report or supplemental report poration or the received or trustee em	ith this filling	does not qualify for the accurate and that my	the exemp	tion stated e shall hav	d in Se te the	ection 119.07(3) same legal effe)(i), Florida Statu ect as if made un	ites. I further o	ertify that the I am an office	information r or director
changed,	or on an attachment with an address	s, with all of	ner like empowered.	ro lediniec	тоу спарі	191 DU	r, Florida Statut	es; and that my	name appears	S HT BIOCK TO (DI BIOCK 11 II
SIGNAT	URE: 1	N						4/30/04	ברר	78169	20