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PICK-UP	Mait Wait	MAIL.
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Certified Copies	Certificates	
Special Instructions to Filing Officer:		





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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Mirta's Cafe, Inc. (Name of corporation)
DOCUMENT NUMBER: P04000012643
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Donía a. Roberts, P.A. (Name of contact person)
The Law Office of Donia A. Roberts, P.A. (Firm/Company)
1100 North Main Straet, Suite C
(Address)
Belle Glade, Florida 33430 (City/state and zip code)
For further information concerning this matter, please call:
Donia A. Roberts at (561) 993-0990 (Name of contact person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

-	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida
	r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: Mirta's Cafe, Inc.
2. The principal	office address: 572 E. Canai Street South, Belle Glade, Florida 33430
3. The mailing a	ddress (if different): 572 E. Canal Street South, Belle Glade, Florida 33430
4. Date of incorp	poration/qualification: 01/15/2004 Document number: P04000012643
5. The name and	street address of the current registered agent and registered office on file with the thent of State:
	Yoel Damas
	3001 SW 133 Place 79 9
	Miami, Florida 33175
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	Mirta M. Ayes
	572 E. Canal Street South
	(P.O Box NOT acceptable)
	Belle Glade, Florida 33430
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.
A Signation	A Mirta M. Aves (Printed or typed name and utie)
I hereby accept I further agree of my duties, an document is bet corporation ha	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance ad I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.
Kicky	grature of Registered (gent) June 6, 2005 (Date)
If signing on be	chalf of an entity:
	Typed or Printed Name)

* * * FILING FEE: \$35.00 * * *