

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000128094

Entity Name: BARILOCHE CAFE INC.

FILED  
Feb 04, 2005  
Secretary of State

## Current Principal Place of Business:

1935 WEST AVENUE  
SUITE 102  
MIAMI BEACH, FL 33139

## New Principal Place of Business:

## Current Mailing Address:

1935 WEST AVENUE  
SUITE 102  
MIAMI BEACH, FL 33139

## New Mailing Address:

FEI Number: 56-2478044

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ESTRADA, CLAUDIA P MS.  
1504 BAY ROAD  
2303  
MIAMI BEACH, FL 33139 US

## Name and Address of New Registered Agent:

ESTRADA, CLAUDIA P MS.  
2000 N BAYSHORE DR  
423  
MIAMI, FL 33137 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: CLAUDIA ESTRADA

02/04/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PARRILLA, EDUARDO M MR.  
Address: 1504 BAY ROAD APT. 2303  
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: VP (X) Delete  
Name: ESTRADA, CLAUDIA P MS.  
Address: 1504 BAY ROAD APT. 2303  
City-St-Zip: MIAMI BEACH, FL 33139 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: CLAUDIA, ESTRADA P MS  
Address: 2000 N BAYSHORE DR APT 423  
City-St-Zip: MIAMI, FL 33137 US

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CLAUDIA ESTRADA

P

02/04/2005

Electronic Signature of Signing Officer or Director

Date