
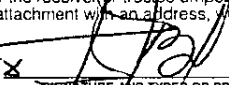


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 15, 2005 8:00 am
Secretary of State

04-20-2005 90293 019 ***150.00

DOCUMENT # P04000149366			
1. Entity Name LUZMA'S CAFE, CORP.			
Principal Place of Business 751 EAST 45TH STREET HIALEAH, FL 33013		Mailing Address 751 EAST 45TH STREET HIALEAH, FL 33013	
2. Principal Place of Business 5167 E 11 AVE Suite, Apt. #, etc.		3. Mailing Address 5167 E 11 AVE Suite, Apt. #, etc.	
City & State HIALEAH FL		City & State HIALEAH FL	
Zip 33013	Country MIAMI-DADE	Zip 33013	Country MIAMI-DADE
6. Name and Address of Current Registered Agent FARINAS, MARTA R 751 EAST 45TH STREET HIALEAH, FL 33013		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		FL	Zip Code
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 _____			
FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	DP <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ACANDA, LUZ M	NAME	
STREET ADDRESS	3801 S.W. 36TH STREET	STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD, FL 33023	CITY-ST-ZIP	
TITLE	DV <input type="checkbox"/> Delete	TITLE	DV <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FARINAS, MARTA R	NAME	FARINAS, MARTA R.
STREET ADDRESS	751 EAST 45TH STREET	STREET ADDRESS	10704 NW 2 AVE
CITY-ST-ZIP	HIALEAH, FL 33013	CITY-ST-ZIP	MIAMI SHORES FL 33168
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: 		Date: July 7/05 305-6873661	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

66024686



07072005 Chg-P CR2E034 (10/03)

4. FEI Number 43-2064638 Applied For Not Applicable

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

ATTACHMENT



46024686

P04000/49366

LUZMA'S CAFE CORP 1104 40063132 1053
 305-687-3881
 9187 E. 11TH AVE.
 MALEAH, FL 33013

PAY TO THE ORDER OF Florida Department of State \$150
 One hundred fifty DOLLARS

DATE April 15/05

Bank of America
 FOR Document # P04000/49366

DEPARTMENT OF STATE
 FOR DEPOSIT ONLY
 ACCT # 1009088798
 APR 20 2005

2020 69623

BANK OF AMERICA JAX
 6540180704

Capture Date: 20050502 Sequence #: 6540180704