


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 12, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000171778	
1. Entity Name THE HARVESTFIELD CAFE, INC.	

Principal Place of Business 7272 W. ATLANTIC BLVD. MARGATE, FL 33063	Mailing Address 7272 W. ATLANTIC BLVD. MARGATE, FL 33063
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05082006 No Chg-P CR2E034 (11/05)

4. FEI Number 56-2499022	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent LOPEZ, FERNANDO 3131 NW 160TH AVE. CORAL SPRINGS, FL 33065
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**DO NOT WRITE
IN THIS SPACE**

6. 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 _____ (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)) **DATE** _____

FILE NOW!!! FEE IS \$550.00
Due by September 6, 2006

7. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P LOPEZ, FERNANDO 3131 NW 160TH AVE. CORAL SPRINGS, FL 33065
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VP LOPEZ, ANNETTE 3131 NW 160TH AVE. CORAL SPRINGS, FL 33065
TITLE NAME STREET ADDRESS CITY- ST- ZIP	ST ZAVALA, ALICE 3063 NW 92ND ST. CORAL SPRINGS, FL 33065
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
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05/20/06-80093-003 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  **Apr 30 2006 95492-0551**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR face Daytime Phone