2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000151142

1. Entity Name

DULCE CAFETERIA MARKET INC



FILED Feb 08, 2007 08:00 All Secretary of State

Principal Place of Business

Mailing Address

849 WASHINGTON AVENUE MIAMI BEACH, FL 33139

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01162007 No Chg-P CR2E034 (11/05)

4. FEI Number
20-3799329

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SANTANA, DANIEL 849 WASHINGTON AVENUE MIAMI BEACH, FL 33139

DO NOT WRITE IN THIS SPACE

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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OATE										
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees						
10.	OFFICERS AND DIREC	CTORS		*						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SANTANA, DANIEL 849 WASHINGTON AVENUE MIAMI BEACH, FL 33139				U00000627289 02/15/07-80056-003 150.00					
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12. Thereby certify that the information supplied with this filling 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/29/07

(305) 5389220

Daytime Phone #