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Aug 28, 2007 8:00 am
Secretary of State

08-02-2007 90012 010 ***150.00
08-28-2007 90023 050 ***400.00

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000074350

1. Entity Name
COSTA AZUL PERUVIAN KITCHEN INC

40130501

02072007 Chg-P CR2E034 (12/06)

Principal Place of Business	Mailing Address
9151 SUNSET ST SUNRISE, FL 33322 US	9151 SUNSET ST SUNRISE, FL 33322 US

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
8067 OAKLAND PARK BLVD.	9151 SUNSET STRIP
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: SUNRISE, FL	City & State: SUNRISE FL
Zip: 33351 Country:	Zip: 33322 Country:

4. FEI Number: 20-4960875 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
AZOY EA, EDUARDO A 4901 NW 17TH WAY SUITE 301 FORT LAUDERDALE, FL 33309	Name: GERARDO BUITRON Street Address (P.O. Box Number is Not Acceptable): 9151 SUNSET STRIP City: SUNRISE FL Zip Code: 33322

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] GERARDO BUITRON
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BUITRON, GERARDO 9151 SUNSET ST SUNRISE, FL 33322	☐ Delete	 9151 SUNSET STRIP SUNRISE, FL 33322	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BUITRON, HAIDEE M 9151 SUNSET ST SUNRISE, FL 33322	☐ Delete	VP BUITRON, AIDEE M 9151 SUNSET STRIP SUNRISE, FL 33322	☒ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

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: [signature] GERARDO BUITRON (954) 496-1423
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #