2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000102405

Entity Name: MEX CAFE, INC

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

 10031-33-35 SUNSET STRIP
 10031 SUNSET STRIP

 SUNRISE, FL 33322
 SUNRISE, FL 33322

Current Mailing Address: New Mailing Address:

 5080 SW 158 AVE
 10031 SUNSET STRIP

 MIRAMAR, FL 33027
 SUNRISE, FL 33322

FEI Number: 20-5344960 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CARMONA, NORA CARMONA, NORA 5080 SW 158 AVE 3109 NW 107 DR MIRAMAR, FL 33027 US SUNRISE, FL 33351

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: NORA CARMONA

NORA CARMONA 04/30/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: PSD () Delete Title: PSD (X) Change () Addition

 Name:
 CARMONA, NORA
 Name:
 CARMONA, NORA

 Address:
 5080 SW 158 AVE
 Address:
 31909 NW 107 DR

 City-St-Zip:
 MIRAMAR, FL 33027
 City-St-Zip:
 SUNRISE, FL 33351

Title: VPD () Delete Title: () Change () Addition

 Name:
 VEGA, RICHARD
 Name:

 Address:
 8465 SW 165 PLACE
 Address:

 City-St-Zip:
 MIAMI, FL 33193
 City-St-Zip:

Title: OFF () Delete Title: OFF (X) Change () Addition

 Name:
 ESPINOSA, CLAUDIA
 Name:
 ESPINOSA, CLAUDIA

 Address:
 5080 SW 158 AVE
 Address:
 3109 NW 107 DR

 City-St-Zip:
 MIRAMAR, FL 33027
 City-St-Zip:
 SUNRISE, FL 33351

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: NORA CARMONA PSD 04/30/2009