

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000133474

FILED
Nov 14, 2007
Secretary of State

Entity Name: LA CABANA RESTAURANT CAFETERIA INC

Current Principal Place of Business:

20604 NW 2 AVE
MIAMI, FL 33169

New Principal Place of Business:

20601 NW 2 AVE
MIAMI, FL 33169

Current Mailing Address:

20604 NW 2 AVE
MIAMI, FL 33169

New Mailing Address:

20601 NW 2 AVE
MIAMI, FL 33169

FEI Number: 65-0747520

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANCHEZ, RAFAEL
5783-B NW 151 ST
MIAMI LAKES, FL 33014 US

Name and Address of New Registered Agent:

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: RAFAEL SANCHEZ

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GRIFFITHS, COURTNET
Address: 20601 NW 2 AVENUE
City-St-Zip: MIAMI, FL 33169

Title: S () Delete
Name: GRIFFITHS, ANESHA
Address: 20601 NW 2 AVENUE
City-St-Zip: MIAMI, FL 33169

Title: VP () Delete
Name: RHODD, BARRON
Address: 20601 NW 2 AVENUE
City-St-Zip: MIAMI, FL 33169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GRIFFITHS, COURTNEY
Address: 20601 NW 2 AVENUE
City-St-Zip: MIAMI, FL 33169

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: COURTNEY GRIFFITHS

P

11/14/2007

Electronic Signature of Signing Officer or Director

Date