2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000143750

Entity Name: CAFE PEPE OF CITRUS PARK MALL, INC

5530 TURTLE CROSSING LANE

TAMPA, FL 33625

Address: City-St-Zip: FILED Apr 23, 2009 Secretary of State

•		,		
Current P	rincipal Place	e of Business:	New Principal Place of Business:	
8013 CITR TAMPA, F	RUS PARK TO L 33625	WN CENTER		
Current Mailing Address:			New Mailing Address:	
8013 CITR TAMPA, F	RUS PARK TO L 33625	WN CENTER		
FEI Number	: 20-5847107	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:	
TAMPA, F	TLE CROSSIN L 33625 U	S	ourpose of changing its registered	d office or registered agent, or both,
SIGNATUI				
01011/1101		nic Signature of Registered Age	ent	Date
Election Car	mpaign Financin	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	MULYADI, SHA	CROSSING LOOP	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SARDJA, DAV	CROSSING LOOP	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	D (SARDJA, JIMN) Delete IY	Title: Name:	() Change () Addition

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.

Address:

City-St-Zip:

SIGNATURE: SHANTI MULYADI D 04/23/2009