

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000072405

FILED
Apr 07, 2009
Secretary of State

Entity Name: ZORA'S CAFE, INC

Current Principal Place of Business:

819 E. PALM RUN DR.
N. FT LAUDERDALE, FL 33068

New Principal Place of Business:

Current Mailing Address:

819 E. PALM RUN DR.
N. FT LAUDERDALE, FL 33068

New Mailing Address:

FEI Number: 26-0428671 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALVENTE, LIBIA
819 E.PALM RUN DR.
N. FT. LAUDERDALE, FL 33068 US

Name and Address of New Registered Agent:

CALVENTE, ALBERTO
819 E.PALM RUN DR.
N. FT. LAUDERDALE, FL 33068 US

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: ALBERTO CALVENTE 04/07/2009

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: DIR () Delete
Name: CALVENTE, LIBIA
Address: 819 E. PALM RUN DR
City-St-Zip: N FT. LAUDERDALE, FL 33068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: CALVENTE, ALBERTO
Address: 819 E. PALM RUN DR
City-St-Zip: N FT. LAUDERDALE, FL 33068

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: ALBERTO CALVENTE DIR 04/07/2009

Electronic Signature of Signing Officer or Director Date