2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000096036

Entity Name: FRESCO CAFE CORPORATION

FILED Apr 02, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
3285 OXFORD DRIVE KISSIMMEE, FL 34746				FORD DRIVE IEE, FL 34746	US	
Current Mailing Address:				New Mailing Address:		
3281OXFORD DRIVE KISSIMMEE, FL 34746				3285 OXFORD DRIVE KISSIMMEE, FL 34746 US		
FEI Number:	26-0787223	FEI Number Applied For ()	FEI Number Not Ap	oplicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
The above	R PATH E, FL 34746 named entity s	US submits this statement for the pu	urpose of changing	g its registered c	office or registered agent, or both,	
	e of Florida. 					
SIGNATUF		ic Signature of Registered Ager	nt		 Date	
Election Car		g Trust Fund Contribution ().	ı		Date	
OFFICER!	S AND DIREC	TORS:	ADDITIO	NS/CHANGES	TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip: Title: Name:	ACOSTA, CECII 3198 BEAR PAT KISSIMMEE, FL	ГН ₋ 34746 Delete	Title: Name: Address: City-St-Zip Title: Name:	ACOSTA, CECI 3198 BEAR PA : KISSIMMEE, F	.TH L 34746 US) Change ()Addition	
Address: City-St-Zip:	3198 BEAR PATKISSIMMEE, FL	ГН	Address: City-St-Zip	3198 BEAR PA	тн	
Title: Name: Address: City-St-Zip:	P (X) ACOSTA, CECII 3198 BEAR PA ^T KISSIMMEE, FL	ГН	Title: Name: Address: City-St-Zip) Change ()Addition	
Title: Name: Address: City-St-Zip:	P (X) ACOSTA, CECII 3198 BEAR PA ^T KISSIMMEE, FL	ГН	Title: Name: Address: City-St-Zip) Change ()Addition	
Title: Name: Address: City-St-Zip:	VP (X) PEREZ, CECILI 3198 BEAR PA KISSIMMEE, FL	ГН	Title: Name: Address: City-St-Zip) Change ()Addition	
Title: Name: Address: City-St-Zip:	VP (X) PEREZ, CECILI 3198 BEAR PA [*] KISSIMEE, FL	ГН	Title: Name: Address: City-St-Zip	` ') 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.

SIGNATURE: CECILIA ACOSTA P 04/02/2008