

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000075410

**FILED**  
**Mar 02, 2009**  
**Secretary of State**

**Entity Name:** LA DULCE VIDA BAKERY & CAFE, INC.

**Current Principal Place of Business:**

505 NW 12 AVENUE  
MIAMI, FL 33136

**New Principal Place of Business:**

**Current Mailing Address:**

901 PONCE DE LEON BLVD  
700  
CORAL GABLES, FL 33134

**New Mailing Address:**

505 NW 12 AVENUE  
MIAMI, FL 33136

**FEI Number:** 26-3152264

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CASTELLANOS, REINALDO ESQ  
9960 BIRD ROAD  
MIAMI, FL 33165 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P/D ( ) Delete  
Name: DEL RIO, RICARDO A SR.  
Address: 901 PONCE DE LEON BLVD, #700  
City-St-Zip: CORAL GABLES, FL 33134

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P/D (X) Change ( ) Addition  
Name: DEL RIO, RICARDO A SR.  
Address: 505 NW 12 AVENUE  
City-St-Zip: MIAMI, FL 33136

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: RICARDO DEL RIO

P/D

03/02/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date