

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000084720

FILED  
Apr 25, 2011  
Secretary of State

Entity Name: SOUL CAFE INC.

**Current Principal Place of Business:**

17315 HOMESTEAD AVE  
MIAMI, FL 33157

**New Principal Place of Business:**

**Current Mailing Address:**

17315 HOMESTEAD AVE  
MIAMI, FL 33157

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HUTCHINSON, COURTNEY  
2421 SOUTHWEST 86TH AVENUE  
MIRAMAR, FL 33025 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: PARKES, SEYMOUR  
Address: 7310 BILTMORE BLVD  
City-St-Zip: MIRAMAR, FL 33023

Title: VP  
Name: PARKES, SEYMOUR  
Address: 7310 BILTMORE BLVD  
City-St-Zip: MIRAMAR, FL 33023

Title: VP  
Name: HUTCHINSON, COURTNEY  
Address: 2421 SOUTHWEST 86TH AVENUE  
City-St-Zip: MIRAMAR, FL 33025

Title: VP  
Name: HUTCHINSON, COURTNEY  
Address: 2421 SOUTHWEST 86TH AVENUE  
City-St-Zip: MIRAMAR, FL 33025

Title: VP  
Name: HUTCHINSON, COURTNEY  
Address: 2421 SOUTHWEST 86TH AVENUE  
City-St-Zip: MIRAMAR, FL 33025

Title: VP  
Name: PARKES, SEYMOUR  
Address: 7310 BILTMORE BLVD  
City-St-Zip: MIRAMAR, FL 33023

I hereby 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 all other like empowered.

SIGNATURE: SEYMOUR PARKES

P

04/25/2011

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

\_\_\_\_\_  
Date