

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 25, 2005 8:00 am
Secretary of State

07-25-2005 90105 026 ***150.00

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| DOCUMENT # P93000066408 | |
| 1. Entity Name LAURITA RESTAURANT, INC. | |



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|--|--|
| Principal Place of Business 7033 NW 36TH AVENUE MIAMI, FL 33147 US | Mailing Address 2128 PRAIRIE AVENUE MIAMI BEACH, FL 33139 US |
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| | | | |
|--------------------------------|---------|---------------------|---------|
| 2. Principal Place of Business | | 3. Mailing Address | |
| State Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |



07062005 Chg-P CR2E034 (10/03)

| | | |
|---|--|--|
| 4. FEI Number 65-0001651 | | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required |

| | | | |
|--|--|---|--|
| 6. Name and Address of Current Registered Agent | | 7. Name and Address of New Registered Agent | |
| ALEMANY, CANDY MARIE 2128 PRAIRIE AVENUE MIAMI BEACH, FL 33139 | | Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code | |

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|--|---|---|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P ALEMANY, CANDY MARIE 2128 PRAIRIE AVE. MIAMI BEACH, FL 33139 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Candy Alemany
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/6/05 (305) 362-9139
Date Daytime Phone #

ATTACHMENT
20065375

LAURITA RESTAURANT INC.
7033 NW 36 Avenue
Miami Florida 33147

July 6 of 2005.

DIVISION OF CORPORATIONS
P O Box 1500
Tallahassee-Florida 32302-1500

Re.: Document P93000066408


Gentlemen:

The reference of this letter is to advice the fact, that I am sending my Annual Report late due to I did not received the notice for this year.

I just find out that the first of May had to be paid to be on time, I am sorry for this onconvenience, but for forther years I promess, that this delay in filing my annual report will not happen to me again.

I appreciated your help in this matter, I hope accept my ck. number 792 por the amount of \$150.00.

Sincerely,


Candy Alemany, Pres.
LAURITA RESTAURANT INC