FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

P94000079283

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT

1996

DIVISION OF CORPORATIONS

DOCUMENT # P94000079283

1. Corporate Name: CAFE ENTERTAINMENT, INC.

Principal Place of Business / Mailing Address

800001974238--8
-10/15/96--01127--001
****321.25 ****225.00

2. Principal Place of Business 21 6410 METROWEST BLVD.	2a. Mailing Address 26	3. Date Incorporated or Qualified 10-24-94	3a. Date of Last Report 1995
Suite ~~Suite~~ 22 1109	Suite, Apt. #, etc. 27 SAME	4. FEI Number 59-3275567	Applied For / Not Applicable
City & State 23 ORLANDO, FLORIDA	City & State 28	5. Certificate of Status Desired ☑	$8.75 Additional Fee Required
Zip 24 32835	Country 25 USA	Zip 29	Country 30
		6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name: MARIA A. RONCARI
82 Street Address (P.O. Box Number is Not Acceptable): 6410 METROWEST BLVD.
83 SUITE 1109
84 City: ORLANDO FL 85 Zip: 32835

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Maria A. Roncari, Pres. 10-8-96 MARIA A. RONCARI, PRES.
Signature, typed or printed name & registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12 OFFICERS AND DIRECTORS		13. ADDRESS ~~ADDITIONS~~/CHANGES TO OFFICERS AND DIRECTORS IN 12	
	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PRESIDENT MARIA A. RONCARI 6410 METROWEST BLVD. SUITE 1109 ORLANDO, FL 32835
SEC/TREAS TODD C. CONNELL 3189 BEAR PATH KISSIMMEE, FLA 34746	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	10/9/96 DC
	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	VICE PRES. ADDRESS HEATHER R. RONCARI 2160 ALCOBE CIRCLE OCOEE, FL. 34761 $225.00
	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Maria A. Roncari MARIA A. RONCARI 10-8-96 (407) 935-8474
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

President