

2006 FOR PROFIT CORPORATION ANNUAL REPORT

08-03-2006 90003 025 ***150.00
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

50024076



07302006 No Chg-P CR2E034 (11/05)

DOCUMENT # P96000057164

1. Entity Name
SMOOTHIE CAFE OF DORAL, INC.



Principal Place of Business 9581 NW 41ST ST MIAMI, FL 33178 US	Mailing Address 9581 NW 41ST ST MIAMI, FL 33178 US
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DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0688659	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**OSORIO, MARILOZ
9581 NW 41ST ST
MIAMI, FL 33178**

DO NOT WRITE IN THIS SPACE

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: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agents signature required when remaining)

FILE NOW!!! FEE IS \$550.00 Due by September 8, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD OSORIO, MARILOZ 9581 NW 41 ST ST MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BLANCA, ALFARO 5410 NW 107 AVE, UNIT 505 MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: MariLuz Osorio President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: _____ Daytime Phone #: _____

Page 2 of 2

Miami, August, 28, 2006

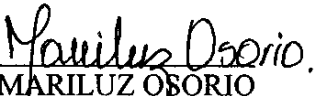
FLORIDA DEPARTMENT OF STATE
Division of Corporations
P.O. Box 6327
Tallahassee, Fl, 32314

Ref: SMOOTHIE CAFÉ OF DORAL INC.
FIN # 65-0688659
P960000957164

This letter is in reference to a notice received on August 3, 2006, informing me that the above-mentioned company, has not pay the annual report, it was made by check # 1687; it was sent you on March, 12, 2006.

I appreciate your help in advance, and for any questions please call me at 305-436-0220

Sincerely,


MARILUZ OSORIO
PRESIDENT