2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000060386

Entity Name: CAFE VARONA, INC.

FILED Apr 27, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

610 WREN AVE

MIAMI SPRINGS, FL 33166

Current Mailing Address: New Mailing Address:

PO BOX 661454

MIAMI SPRINGS, FL 33166

FEI Number: 65-0582134 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

CONSULTING SERVICES OF SOUTH FLORIDA 2121 PONCE DE LEON BLVD.

1050

CORAL GABLES, FL 33134 US

NELSON J. VARONA 610 WREN AVENUE MIAMI SPRINGS, FL 33166 US

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: NELSON J. VARONA 04/27/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution (X).

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: ANTONY, VARONA M

Address: 610 WREN AVE. Address: 610 WREN AVE

City-St-Zip: MIAMI SPRINGS, FL 33166 City-St-Zip: MIAMI SPRINGS, FL 33166

 Name:
 VARONA, NELSON J
 Name:
 VARONA, CAROL J

 Address:
 8210 SW 63 PL
 Address:
 610 WREN AVE

City-St-Zip: MIAMI, FL 33143 City-St-Zip: MIAMI SPRINGS, FL 33166

Title: VP () Delete Title: () Change () Addition Name: VARONA, DAVID A Name:

 Address:
 610 WREN AVE
 Address:

 City-St-Zip:
 MIAMI SPRINGS, FL 33166
 City-St-Zip:

Title: S () Delete Title: S (X) Change () Addition

 Name:
 GANCHIZ, LÂURIE V
 Name:
 SANCHEZ, LÂURIE V

 Address:
 610 WREN AVE
 610 WREN AVE
 610 WREN AVE

 City-St-Zip:
 MIAMI SPRINGS, FL 33166
 City-St-Zip:
 MIAMI SPRINGS, FL 33166

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: ANTHONY M. VARONA P 04/27/2007