2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000038636

FILED May 16, 2007 8:00 am Secretary of State 05-16-2007 90014 002 ***150.00

1. Entity Name ELSA'S CAFE, INC.									
Principal Place of Business			Mailing Address			401	4017itena		
8025 NW 36 STREET STE 313 MIAMI, FL 33166			8025 NW 36 STREET STE 313 MIAMI, FL 33166						
					•				
2. Principal Place of Business - No P.O. Box #			3. Mailing Address						
Suite, Apt. #, etc.						~05092007	Chg-P -	CR2E034 (12/00	5)
City & State			City & State			4. FEI Numb 65-076		 	Applied For Not Applicable
Zip Country			Zip	Country			of Status Desired	□ \$8.75 A	
	6. Name and Addres	ss of Current Regis			7. Name and Address of New Registered Agent				
MERCADO, MARIA E					Name				
	6 STREET STE 31	3	Street Address		ess (P.O. Box Numb	er is Not Acceptabl	e)		
(8)			City		City	····		FL Zip C	ode
	named entity submits thi ions of registered agent.	s statement for the	purpose of changing its	registere	d office or reg	gistered agent, or bo	th, in the State of Fl	orida. I am familiar wi	th, and accept
SIGNATURE.	Signature, typed or printed name	of registered agent and title	il applicable. (NOT	E: Registered	I Agent signature re	equired when reinstating)		DATE	
	LE NOW!!!- FEE IS ue by September 1		9. Election Campa Trust Fund Cont			-\$5:00-May Be Added to Fees	In accordance corporation did	with s. 607:193(2)(t not receive the pric	o), F.S., the or notice.
10. OFFICERS AND			DIRECTORS 11.			ADDITIONS	I /CHANGES TO OFF	FICERS AND DIRECTO	DRS IN 11
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STREET ADDRESS CITY-ST-ZIP					T ADDRESS ST-ZIP				

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.

Moria Elsa Muco-33
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Elsa MUCOSO