


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 02, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # P97000073911</b> 1. Entity Name CACHE' EVENTS INC.	
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Principal Place of Business 1314 N. DIXIE HWY HOLLYWOOD, FL 33020	Mailing Address 1314 N. DIXIE HWY HOLLYWOOD, FL 33020
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04242007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 06-1513259	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  BLACK, DAVID TYLER 1314 N. DIXIE HWY HOLLYWOOD, FL 33020	<b>DO NOT WRITE IN THIS SPACE</b>
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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 Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STV OSORIO, GILBERT J 3625 N COUNTRY CLUB DR, 2009 AVENTURA, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BLACK, DAVID T 3625 N. COUNTRY CLUB DR #2009 AVENTURA, FL 33180
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE  
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05/23/07-80025-018 150.00

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:**  **David T. Black, Pres.** 4/25/07 (954) 922-2778  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #