FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000015111

1. Corporation Name

SYDNEY'S CAFE, CORP.

Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90090 027 ***150.00



										f 11001 1161 1061	
Principal Plac	e of Business	Ma	ailing Address								
2114 WEST 68TH STREET 2114 WEST 68TH STREET							1				
HIALEAH FL 33	LEAH FL 33016					DO NOT WRITE IN THIS SPACE					
							<u> </u>	. Date Incorporated or Qualifed	SSPACE		
			•				3				
								02/16/1998			
2. Principal P	lace of Business	2a.	Mailing Address				4	FEI Number		pplied For	
21		26						65-0819579		ot Applicable	
Suite, Apt.	#, etc.	\perp	Suite, Apt. #, etc.				5	. Certifcate of Status Desired		Additional	
22								5. Certificate of status Desired Fee Required			
City & State			City & State				6	6. Election Campaign Financing \$5.00 May Be			
23		28	·					Trust Fund Contribution	Added	to Fees	
Zip	Country		Zip	Cou	ıntry		8	. This corporation owes the current year Ir	ntangible	/ .	
24	25	29		30				Personal Property Tax.	Yes	ØNo	
	9. Name and Address of Currer	nt Regis	tered Agent				10	, Name and Address of New Registered	l Agent		
					81	Name					
GAY	ARRA, VICENTE							Annual Control of the			
2114 WEST 68TH STREET			82			Street /	reet Address (P.O. Box Number is Not Acceptable)				
HIALEAH FL 33016					83						
					"						
	•				84	City			85 Zip	Code	
								<u>Fi</u>	- f		
11. Pursuant	to the provisions of Sections 607.050	2 and 60	07.1508, Florida Statut	es, the a	bove	e-named	corporation	on submits this statement for the purpose coord of directors. I hereby accept the appo	of changing its continent as o	s registered egistered	
office of a	registered agent, or both, in the State im familiar with, and accept the obliga	tions of.	a. Such change was a Section 607.0505, Flo	rida Stat	utes.	ше согрс	oradon's c	JOSIG OF GIRECIDIS. THE LEDY SCOOP! WE SPP	Minumont as i	ogiatorea	
			,				= - ~	and the second of the second	ال يوط ويريس	7 #8 2 4	
SIGNATURE	Signature, typed or printed name of registered age	nt and title i	f applicable. (NOTE	: Registered	Agen	t signature r	required when	reinstating) DATE			
12.	OFFICERS AN	ND DIRE	CTORS	13.				ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	ORS IN 12	
TITLE	D		☐ DELETE	1.1 T	MLE.				☐ Change	☐ Addition	
NAME	GAYARRE, VICENTE			1.2 N	AME						
STREET ADDRESS	AAAA MEAT AATH ATBEET			135	TREET	ADDRESS					
	HIALEAH FL 33016								`		
CITY-ST-ZIP	HIALEAN FL 33010		☐ DELETE	1.4 C	ITY-SI	1-ZP	 		☐ Change	Addition	
TITLE			CT DEFETE						onungo		
NAME				2.2 N							
STREET ADDRESS				2.3 S	TREET	ADDRESS					
CITY-ST-ZIP				_	TY-S	T-ZIP					
TITLE			□ DELETE	3.1 T	TLE	-		4 · · · · · · · · · · · · · · · · · · ·	☐ Change	☐ Addition	
NAME				3.2 N	AME						
STREET ADDRESS				3.3 S	TREET	ADDRESS					
CITY-ST-ZIP					XITY-S						
TITLE	<u> </u>		☐ DELETE	4.1 T					Change	☐ Addition	
					IAME				- •	_	
NAME						ADDDESS					
STREET ADDRESS						ADDRESS	,				
CITY-ST-ZIP	ļ			_	ΠY-S	T-ZIP			Chr	[T] Addition	
TITLE			DELETE	5.1 T					☐ Change	Addition	
NAME				5.2 N							
STREET ADDRESS]			5.3 S	TREET	ADDRESS					
CITY-ST-ZIP]			5.4 C	ITY-ST	r-ZIP					
TITLE			☐ DELETE	6.1 T	ITLE		<u> </u>		Change	☐ Addition	
				6.2 N	AME				٠		
NAME											

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS