2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P98000107410

1. Entity Name
CARLOS' CUBAN CAFE, INC.

Principal Place of Business	Mailing Address
402 E TENNESSEE ST	402 E TENNESSEE ST
TALLAHASSEE, FL 32301	TALLAHASSEE, FL 32301

DO NOT WRITE IN THIS SPACE

04052006 No Chg-P CR2E034 (11/05)

4. FEI Number	Applied For
59-3548056	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BLANK, F P
BLANK, RIGSBY & MEENAN, P.A.
204 S MONROE ST
TALLAHASSEE, FL 32301

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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 _____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing ☐ **$5.00** May Be
Trust Fund Contribution.   Added to Fees

10.	OFFICERS AND DIRECTORS
TITLE	PST
NAME	PLA, ANNE
STREET ADDRESS	402 E TENNESSEE ST
CITY-ST-ZIP	TALLAHASSEE, FL 32301
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000502217
04/25/06-80092-011 150.00

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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: _Anne Pla_   4/5/06   850-222-8581

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #