

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000036956

FILED
Jan 31, 2007
Secretary of State

Entity Name: LET'S MAKE A DAIQUIRI AT THE DOLPHIN, INC.

Current Principal Place of Business:

11401 NW 12TH STREET
E 520
MIAMI, FL 33172

New Principal Place of Business:

Current Mailing Address:

11401 NW 12TH STREET
E 520
MIAMI, FL 33172

New Mailing Address:

FEI Number: 65-0995977 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARNES, LESLEY A
401 BISCAYNE BLVD, #MS 100
MIAMI, FL 33132 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BARNES, PARKER L JR
Address: 401 BISCAYNE BLVD, #MS 100
City-St-Zip: MIAMI, FL 33132

Title: ST () Delete
Name: BARNES, LESLEY A
Address: 401 BISCAYNE BLVD MS 100
City-St-Zip: MIAMI, FL 33132

Title: VP () Delete
Name: HALL, JOHN C
Address: 401 BISCAYNE BLVD MS 100
City-St-Zip: MIAMI, FL 33132

Title: VP () Delete
Name: DOMIGUEZ, LEO
Address: 401 BISCAYNE BLVD MS 100
City-St-Zip: MIAMI, FL 33132 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LESLEY BARNES

ST

01/31/2007

Electronic Signature of Signing Officer or Director

_____ Date