

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S69300

Entity Name: FINE TABLE, INC.

FILED
May 30, 2008
Secretary of State

Current Principal Place of Business:

3500 MYSTIC POINTE DRIVE
SUITE 3405
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2244
HALLANDALE, FL 330082244

New Mailing Address:

FEI Number: 65-0275275

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANGRES, SAMMY
3500 MISTIC POINT DR.
STE 3405
NORTH MIAMI BEACH, FL 33180 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PEREZ, CARLOS A.,
Address: P.O. BOX 2244 N/A
City-St-Zip: HALLANDALE, FL 330082244

Title: D () Delete
Name: ANGRES, SAMMY,
Address: P.O. BOX 2244 N/A
City-St-Zip: HALLANDALE, FL 330082244

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: SAMMY ANGRES

D

05/30/2008

Electronic Signature of Signing Officer or Director

Date