

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**APPROVED AND FILED**

**MAY 22 AM 10:15**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**CORPORATION  
ANNUAL REPORT  
1995**



**FLORIDA DEPARTMENT OF STATE  
Charles B. Wetherill  
Secretary of State  
Division of Corporations**

**DOCUMENT # V16773 (6)  
CAFE HOMES, INC.**

DO NOT WRITE IN THIS SPACE

**1120-B COLETTA DRIVE ORLANDO FL 32807**

**3. Date Incorporated or Qualified: 02/25/1992**  
**3a. Date of Last Report: 04/22/1994**

**21. Principal Place of Business: 1602 RIO COVE CT.**  
**22. State: ORL**

**4. FEI Number: 59-3111845**  
**Applied For: Not Applicable**

**23. City & State: ORL FL**

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

**24. Tax ID: 32825**

**6. Election Campaign Financing:  \$5.00 May Be Added to Fees**

**25. City & State: ORL FL**

**6. This Corporation has money for exchange fee under Florida Statutes:  Yes  No**

**9. Name and Address of Current Registered Agent:  
RIVERO, CARLOS A.  
1120-B COLETTA DRIVE  
ORLANDO FL 32807**

**10. Name and Address of New Registered Agent:  
81 Name:  
82 Street Address (P.O. Box Number is Not Acceptable):  
1602 RIO COVE CT.  
83  
84 City: ORL FL 85 Zip Code: 32825**

**11. Pursuant to the provisions of Sections 609, 610, and 607, 1907, Florida Statutes, the above named corporation submits this statement for the proposed change of registered agent, which is in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am Secretary of the Corporation.**

**SIGNATURE: CARLOS A. RIVERO, PRES. 3/13/95**

**12. OFFICERS AND DIRECTORS**

NAME	P RIVERO, CARLOS A.
STREET ADDRESS	1120-B COLETTA DRIVE
CITY	ORLANDO FL
NAME	VS RIO, JORGE DEL
STREET ADDRESS	8002 PALM LAKE DRIVE
CITY	ORLANDO FL
NAME	
STREET ADDRESS	
CITY	
NAME	
STREET ADDRESS	
CITY	
NAME	
STREET ADDRESS	
CITY	

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

NAME		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	1602 RIO COVE CT.	
CITY	ORL FL	
NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY		
NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY		
NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY		

**14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not equally for the exemption stated in Section 1907(3), Florida Statutes. I do hereby certify that the information included on the annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect and make publically that I am an officer or director of the corporation or the true owner or person empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on the back of the back of the report as required with my address.**

**SIGNATURE: CARLOS A. RIVERO**

**3/13/95 (467) 658-4444**