

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004535

FILED
May 14, 2008
Secretary of State

Entity Name: JESUCRISTO EL RESTAURADOR, INC.

Current Principal Place of Business:

9889 NW 133 STREET
HIALEAH GARDENS, FL 33018

New Principal Place of Business:

Current Mailing Address:

9889 NW 133 STREET
HIALEAH GARDENS, FL 33018

New Mailing Address:

FEI Number: 26-0302227 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LUIS M. AYZE
9889 NW 133 STREET
HIALEAH GARDENS, FL 33018 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: AYZE, LUIS M
Address: 9889 NW 133 STREET
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: D () Delete
Name: MARRERO, SANTIAGO
Address: 16039 SW 54 COURT
City-St-Zip: MIRAMAR, FL 33027

Title: D () Delete
Name: IGLESIAS, CARLOS
Address: 10732 SW 228 TERR
City-St-Zip: HOMESTEAD, FL 33170

Title: D () Delete
Name: AYZE, ELENA
Address: 9889 NW 133 STREET
City-St-Zip: HIALEAH GARDENS, FL 33018

Title: D () Delete
Name: MUNOZ, ELIEZER JUAN
Address: 9889 NW 133 STREET
City-St-Zip: HIALEAH GARDENS, FL 33018

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: IGLESIAS, CARLOS
Address: 8001 W 26TH AVENUE
City-St-Zip: HIALEAH, FL 33018

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUIS M. AYZE

Electronic Signature of Signing Officer or Director

PRES

05/14/2008

Date