

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000107927

**FILED
Jul 11, 2007
Secretary of State**

Entity Name: LA ESPERANZA RESTAURANTE OF PORT CHARLOTTE, INC.

Current Principal Place of Business:

C/O JUAN RAMIREZ
121 E MARION AVE UNIT 1122
PUNTA GORDA, FL 339503635

New Principal Place of Business:

2150 TAMIAMI TRAIL
UNIT 24
PORT CHARLOTTE, FL 33952

Current Mailing Address:

C/O JUAN RAMIREZ
121 E MARION AVE UNIT 1122
PUNTA GORDA, FL 339503635

New Mailing Address:

FEI Number: 65-0461630 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RAMIREZ, JUAN
121 E MARION AVE UNIT 1122
PUNTA GORDA, FL 339503635 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: O () Delete
Name: RAMIREZ, JUAN
Address: 121 E MARION AVE UNIT 1122
City-St-Zip: PUNTA GORDA, FL 339503635

Title: CO () Delete
Name: RAMIREZ, MARIA C
Address: 121 E MARION AVE UNIT 1122
City-St-Zip: PUNTA GORDA, FL 339503635

Title: D () Delete
Name: GARCIA, ESPERANAZA
Address: 21323 COTTONWOOD AVE
City-St-Zip: PORT CHARLOTTE, FL 33952

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:

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: JUAN RAMIREZ SR. O

Electronic Signature of Signing Officer or Director

07/11/2007

_____ Date