

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000160421

FILED  
Apr 09, 2007  
Secretary of State

Entity Name: EL VOLANTE LATINO CORPORATION

**Current Principal Place of Business:**

4219 1/2 N ARMENIA AVE  
TAMPA, FL 33607

**New Principal Place of Business:**

4353 W. WATERS AVE  
TAMPA, FL 33614

**Current Mailing Address:**

4219 1/2 N ARMENIA AVE  
TAMPA, FL 33607

**New Mailing Address:**

4353 W. WATERS AVE  
TAMPA, FL 33614

FEI Number: 81-0668312

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CARDENAS, LUIS A  
4219 1/2 N ARMENIA AVE  
TAMPA, FL 33607 US

**Name and Address of New Registered Agent:**

CARDENAS, LUIS A  
21706 GARDEN WALK LOOP  
LAND O LAKES, FL 34637 US

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: LUIS A. CARDENAS

04/09/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PS ( ) Delete  
Name: CARDENAS, LUIS A  
Address: 4219 1/2 N. AMENIA AVE  
City-St-Zip: TAMPA, FL 33607

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: P (X) Change ( ) Addition  
Name: CARDENAS, LUIS A  
Address: 21706 GARDEN WALK LOOP  
City-St-Zip: TAMPA, FL 34637

Title: VP ( ) Change (X) Addition  
Name: CARDENAS, ALEIDA  
Address: 21706 GARDEN WALK LOOP  
City-St-Zip: LAND O LAKES, FL 34637

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: LUIS A. CARDENAS

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04/09/2007

Electronic Signature of Signing Officer or Director

Date