


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 25, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # P65000139920


1. Entity Name  
 TWO BROTHERS RANCH, INC.



Principal Place of Business      Mailing Address

5925 GEORGE RD.                      5925 GEORGE RD.  
 TAMPA, FL 33634                      TAMPA, FL 33634

**DO NOT WRITE IN THIS SPACE**



04222008    No Chg-P    CR2E034 (11/05)

4. FEI Number                      Applied For  
 20-3614890                      Not Applicable

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

6. Name and Address of Current Registered Agent

BELLOU INVESTMENTS, INC.  
 14430 N. DALE MABRY HWY  
 TAMPA, FL 33618

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        \$5.00 May Be Added to Fees

00000923343  
 05/16/08-80026-024 150.00

10. OFFICERS AND DIRECTORS

TITLE	PRES
NAME	GONZALEZ, JAVIER
STREET ADDRESS	5925 GEORGE RD.
CITY- ST- ZIP	TAMPA, FL 33634
TITLE	VP
NAME	HERRERA, ROSA
STREET ADDRESS	5925 GEORGE RD.
CITY- ST- ZIP	TAMPA, FL 33634
TITLE	SEC
NAME	GONZALEZ, TAMMY H
STREET ADDRESS	5925 GEORGE RD.
CITY- ST- ZIP	TAMPA, FL 33634
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Javier Gonzalez      Date: 04/20/2008      Daytime Phone #: 813 767 7472

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR