

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 21, 2007 8:00 am
Secretary of State

04-27-2007 90226 022 ***150.00

05-21-2007 90060 025 *****8.75

DOCUMENT # P06000004678 1. Entity Name MI RANCHITO PAISA INC.																																			
Principal Place of Business 1111 AMBER RD ORLANDO, FL 32807		Mailing Address 1111 AMBER RD ORLANDO, FL 32807																																	
2. Principal Place of Business - No P.O. Box # FRANCO HENRY Suite, Apt. #, etc. 4983 DOVER CIRL		3. Mailing Address 4983 DOVER CIRL Suite, Apt. #, etc.																																	
City & State Orlando FL		City & State Orlando, FL																																	
Zip 32807		Zip 32807																																	
4. FEI Number 40-7403574		Applied For ☐ Not Applicable																																	
5. Certificate of Status Desired ☒		\$8.75 Additional Fee Required																																	
6. Name and Address of Current Registered Agent OVIEDO, SIMEON 8425 VALENCIA VILLAGE LN # 108 ORLANDO, FL 32825		7. Name and Address of New Registered Agent Name FRANCO HENRY Street Address (P.O. Box Number is Not Acceptable) 4983 DOVER CIRL City Orlando FL Zip Code 32807																																	
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 5-15-2007 Signature, typed or printed name of registered agent and year of appointment (NOTE: Registered Agent signature required when reappointing)																																			
FILE NOW!!! FEE IS \$150.00 *After May 1, 2007 Fee will be \$350.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																	
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td style="width: 70%;"> P ☐ Delete FRANCO, HENRY 4983 DOVER CIRL ORLANDO, FL 32807 </td> </tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> </table>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ☐ Delete FRANCO, HENRY 4983 DOVER CIRL ORLANDO, FL 32807															11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td style="width: 70%;"> ☐ Change ☐ Addition </td> </tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> <tr><td colspan="2"> </td></tr> </table>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition														
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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: DATE 5-15-2007 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																			