## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000075553

514 NORIDGE DRIVE

City-St-Zip: LEHIGH ACRES, FL 33936 US

Address:

Entity Name: A FIESTA PARTY RENTAL, INC.

FILED Sep 09, 2009 Secretary of State

| Current Principal Place of Business:  |   |                                   | New Principal Place of I                         | New Principal Place of Business:             |  |
|---|---|-----------------------------------|--|--|--|
| 514 NORIE<br>LEHIGH A   | DGE DR<br>CRES, FL 33936  | US                                | 522 JOEL BLVD<br>UNIT B<br>LEHIGH ACRES, FL 339: | 36 US  |  |
| Current Mailing Address:  |   |                                   | New Mailing Address:                             | New Mailing Address:                         |  |
|   | DGE DRIVE<br>CRES, FL 33936   | US                                | 522 JOEL BLVD<br>UNIT B<br>LEHIGH ACRES, FL 339: | 36 US  |  |
| FEI Number:   | : 26-0481356 F  | El Number Applied For ( )         | FEI Number Not Applicable ( )                    | Certificate of Status Desired ( )            |  |
| Name and Address of Current Registered Agent: Name and Address of New Registered Agent: |   |                                   |  | ew Registered Agent:                         |  |
| 514 NORIE   | EZ, JESUS<br>DGE DRIVE<br>CRES, FL 33936                            | US                                |  |  |  |
|   | named entity sub<br>of Florida.                                     | mits this statement for the p     | purpose of changing its registered of            | fice or registered agent, or both,           |  |
| SIGNATUR  | RE:   |                                   |  |  |  |
|   | Electronic 8  | Signature of Registered Ag        | ent  | Date   |  |
|   |   | (b), F.S., the corporation did no | ot receive the prior notice.                     |  |  |
| OFFICERS AND DIRECTORS:   |   |                                   | ADDITIONS/CHANGES                                | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | P () Del<br>GUTIERREZ, JESU<br>514 NORIDGE DRI'<br>LEHIGH ACRES, FI | IS<br>VE                          | Title: ( ) Name: Address: City-St-Zip:           | Change ( ) Addition                          |  |
| Title:  | V ()Del   |                                   | Title: V P (X)                                   | Change ( ) Addition                          |  |

Address:

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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: JESUS GUTIERREZ P 09/09/2009