# I hereby 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 all other like empowered.

OWNER

#### SIGNATURE: ERIC PHILLIPS

Electronic Signature of Signing Officer/Director Detail

# DOCUMENT# P96000049517

Entity Name: NACHO MAMA'S OF COLLIER COUNTY, INC.

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

# Current Principal Place of Business:

599 S COLLIER BLVD 201 MARCO ISLAND, FL 34145

#### **Current Mailing Address:**

599 S COLLIER BLVD 201 MARCO ISLAND, FL 34145 US

#### FEI Number: 59-3492112

### Name and Address of Current Registered Agent:

PHILLIPS, ERIC S 1878 DOGWOOD DR MARCO ISLAND, FL 34145 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:

Electronic Signature of Registered Agent

#### Officer/Director Detail :

Title	D	Title	VP
Name	PHILLIPS, ERIC S	Name	RAINONE, JAMES D
Address	1878 DOGWOOD DR	Address	30 CREST AVE
City-State-Zip:	MARCO ISLAND FL 34145	City-State-Zip:	NARRAGANSETT RI 02882

## FILED Mar 31, 2014 Secretary of State CC7114331883

Certificate of Status Desired: No

03/31/2014

Date