2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 13, 2004 8:00 am Secretary of State **DOCUMENT # 384336** 1. Entity Name 04-13-2004 90006 020 ***150.00 EL RANCHO NO TENGO, INC. Principal Place of Business Mailing Address 1400 OLD COUNTRY CLUB ROAD LAKE CITY FL 32025 1400 OLD COUNTRY CLUB ROAD LAKE CITY FL 32025 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) 908 S. E. Countey Club Rond 908 S.E. Country Club Road 4. FEI Number Applied For City & State 59-1351704 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HILL, JEFFREY L. 1400 OLD COUNTRY CLUB RD. LAKE CITY FL 32025 Country Club RoAd 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. TITLE P/D ☐ Delete TITLE Hill, Jeffrey L. SR. HILL, JEFFREY L SR. NAME NAME 908 S.E. Country Club Rd. 1400 OLD COUNTRY CLUB RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKE CITY FL 32025 Ctry-st-zip Lake City, Fl. TITLE VST ☐ Delete TITLE P Change ☐ Addition Addicess Hill, Lindan P. HILL, LINDA P NAME NAME 908 S.E. Country Club Rd. STREET ADDRESS 1400 OLD COUNTRY CLUB RD STREET ADDRESS ake City, F1. 32025 CITY-ST-ZIP LAKE CITY FL 32025 CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete HARTLEY, TIMOTHY NAME STREET ADDRESS 649 PENNSYLVANIA AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAKE CITY FL 32025 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITI F ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

FILED

MING OFFICER OR DIRECTOR SIGNATURE: