

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005844

FILED  
Jan 30, 2004  
Secretary of State

Entity Name: TORTILLAS SAN ANTONIO, INC.

**Current Principal Place of Business:**

401 SOUTH 6TH AVENUE  
WAUCHULA, FL 33873

**New Principal Place of Business:**

**Current Mailing Address:**

3192 VOLUNTEER ROAD  
ELM CITY, NC 27822

**New Mailing Address:**

FEI Number: 56-2085427      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PADILLA, JOSE  
401 SOUTH 6TH AVENUE  
WAUCHULA, FL 33873      US

**Name and Address of New Registered Agent:**

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

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PCTD ( ) Delete  
Name: JOYNER, RICHARD  
Address: 3192 VOLUNTEER ROAD  
City-St-Zip: ELM CITY, NC

Title: VD ( ) Delete  
Name: ARMENDARIZ, J. ANTONIO  
Address: 2608 AMHERST ROAD  
City-St-Zip: ROCKY MOUNT, NC

Title: SD ( ) Delete  
Name: LEGGETT, SUSAN  
Address: 4981 OLD BAILEY HIGHWAY  
City-St-Zip: NASHVILLE, NC 27856

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SUSAN LEGGETT

SD

01/30/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date