

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 18, 2006 08:00 AM
Secretary of State

DOCUMENT # H68530

1. Entity Name
G. & R. RESTAURANTS I, INC.



Principal Place of Business

**21000 ALLAPATAH DR.
MIAMI, FL 33189 US**

Mailing Address

**12382 SW 99TH ST
MIAMI, FL 33186-2545 US**



04132006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2564709

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**ESPINOSA, RAMONA
12382 SW 99 ST
MIAMI, FL 33186**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ESPINOSA, GUIDO
STREET ADDRESS	12382 SW 99 ST
CITY-ST-ZIP	MIAMI, FL 33186
TITLE	D
NAME	ESPINOSA, RAMONA
STREET ADDRESS	12382 SW 99 ST
CITY-ST-ZIP	MIAMI, FL 33186
TITLE	VP
NAME	ESPINOSA III, GUIDO VICE-PR
STREET ADDRESS	1119 S W 159 TERR.
CITY-ST-ZIP	PEMBROKE PINES, FL 33027
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000518378
05/02/06-80009-006 158.75

**DO NOT WRITE
IN THIS SPACE**

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:

Guido Espinosa **Guido Espinosa**

4/12/06

59-256-0496

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #