


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2005 8:00 am
Secretary of State

02-16-2005 90017 050 ***150.00

DOCUMENT # K30188					
1. Entity Name DON ARTURO RESTAURANT, INC.					
Principal Place of Business 1198 S.W. 27TH AVE. FT. LAUDERDALE, FL 33312 US			Mailing Address 1198 S.W. 27TH AVE. FT. LAUDERDALE, FL 33312 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FERNANDEZ, ZIOLA 1198 SW 27TH AVE FORT LAUDERDALE, FL 33312				7. Name and Address of New Registered Agent Name <u>Zoila Fernandez</u> Street Address (P.O. Box Number is Not Acceptable) <u>1198 SW 27 Ave.</u> City <u>FORT Lauderdale</u> FL Zip Code <u>33312</u>	
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. Zoila Fernandez SIGNATURE <u>Zoila Fernandez</u> (NOTE: Registered Agent signature required when reinstating) DATE <u>2/01/05</u>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD FERNANDEZ, ZOILA <input type="checkbox"/> Delete 11918 SW 27 AVE FORT LAUDERDALE, FL 33312		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS FERNANDEZ, CESAR A. JR. <input type="checkbox"/> Delete 18100 SW 50 CT FT. LAUDERDALE, FL 33331		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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12. 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.					
SIGNATURE: <u>Zoila Fernandez</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Zoila Fernandez			DATE <u>2/01/05</u> (954) 584 7966 Daytime Phone #		

40018751



02012005 Chg-P CR2E034 (10/03)

4. FEI Number
65-0071829

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name **Zoila Fernandez**

Street Address (P.O. Box Number is Not Acceptable)

1198 SW 27 Ave.

City **FORT Lauderdale** **FL** Zip Code **33312**

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. **Zoila Fernandez**

SIGNATURE **Zoila Fernandez** (NOTE: Registered Agent signature required when reinstating) DATE **2/01/05**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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CITY-ST-ZIP

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FORT LAUDERDALE, FL 33312

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