


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 24, 2004 08:00 AM
Secretary of State

DOCUMENT # M18168
 1. Entity Name
 EL CHAPITO CAFETERIA, INC.



Principal Place of Business
 1092 W. 23 STREET
 HIALEAH, FL 33010

Mailing Address
 1092 W. 23 STREET
 HIALEAH, FL 33010

DO NOT WRITE IN THIS SPACE



03152003 No Chg-P CR2E034 (10/03)

4. FEI Number
 59-2554557

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

HEREDIA, MAYRA
 1151 W. 23 STREET
 HIALEAH, FL 33010

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reissuing)

FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS HEREDIA, MAYRA 1151 W. 23 STREET HIALEAH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GONZALEZ, GLORIA EMILIA 1151 W. 23 STREET HIALEAH, FL
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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)(f), 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 807, 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: [Signature] **5/19/04 305 8874185**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #