2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2006
Secretary of State

DOCUMENT# N01000002631

Entity Name: HOGAR RESTAURACION, INC.

Current Principal Place of Business:

109 APRIL LANE
TAMPA, FL 33613

New Principal Place of Business:

Current Mailing Address:

109 APRIL LANE
TAMPA, FL 33613

New Mailing Address:

FEI Number: 59-3757904 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PETERS, ALFRED
6148 OAK CLUSTER CIRCLE
TAMPA, FL 33634 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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: DIAZ, J. EDGAR
Address: 4417 W. KNOLLWOOD STREET
City-St-Zip: TAMPA, FL 33614

Title: D ( ) Delete
Name: CORTES, ANTONIO
Address: 4514 W. SLIGH AVENUE
City-St-Zip: TAMPA, FL 33614

Title: TD ( ) Delete
Name: HERRERA, ELADIO
Address: 14802 N. FLORIDA AVE. # 0-239
City-St-Zip: TAMPA, FL 33613

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 Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELADIO HERRERA TD 03/29/2006

Electronic Signature of Signing Officer or Director — Date