## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000009344

Title:

Name:

Address:

City-St-Zip:

SD

FEBRES, IRIS

TAMPA, FL 33610

( ) Delete

6225 S DALE MABRY AVE

FILED Jan 16, 2009 Secretary of State

Entity Nam	1e: FARO DE	ERESTAURACION, INC.		·	
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2701 W GR TAMPA, FL	REEN STREE 33607	Т			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
2701 W GR TAMPA, FL	REEN STREE 33607	Т			
FEI Number:	26-1188404	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
RIVERA, JA 901 YORK BRANDON	DRIVE	US			
The above in the State		submits this statement for the pu	urpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	E:				
Electronic Signature of Registered Agent			nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ( ) RIVERA, JAVIE 901 YORK DRI BRANDON, FL	VE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPD ( ) RIVERA, CAND 901 YORK DRI BRANDON, FL	VE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	TD ( ) MONTES, ALIC 686 DRUID PA		Title: Name: Address:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JAVIER A RIVERA Ρ 01/16/2009

() Change () Addition