

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 20, 2004 8:00 am
Secretary of State

02-04-2004 90066 009 ***150.00

66402514



MOORE CR2E034 (11/03)

DOCUMENT # P00000028096 1. Entity Name RANCHO EL RODEO, INC.																															
Principal Place of Business 1550 N FEDERAL HWY DELRAY BEACH FL 33483			Mailing Address 1550 N FEDERAL HWY DELRAY BEACH FL 33483																												
2. Principal Place of Business		3. Mailing Address																													
Suite, Apt. #, etc.		Suite, Apt. #, etc.																													
City & State		City & State		4. FEI Number 65-1010022																											
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																											
5. Name and Address of Current Registered Agent FRANCO CARLOS 1550 N FEDERAL HWY DELRAY BEACH FL 33483			6. Name and Address of New Registered Agent Name <u>SIXTO CARRILLO</u> Street Address (P.O. Box Number is Not Acceptable) <u>1206 S. FEDERAL HWY 58</u> City <u>DELRAY BEACH, FL 3</u> FL Zip Code <u>33483</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. SIGNATURE <u>Sixto Carrillo</u> <u>Sixto Carrillo</u> <u>1/28/04</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																															
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																												
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;"> <small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small> </td> <td style="width: 50%; padding: 2px;"> <small>Delete</small> <input type="checkbox"/> </td> </tr> <tr> <td> PD FRANCO CARLOS 434 LANCASTER STREET BOCA RATON FL 33487 </td> <td></td> </tr> <tr> <td> <small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small> </td> <td> <small>Delete</small> <input type="checkbox"/> </td> </tr> <tr> <td> <small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small> </td> <td> <small>Delete</small> <input type="checkbox"/> </td> </tr> <tr> <td> <small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small> </td> <td> <small>Delete</small> <input type="checkbox"/> </td> </tr> <tr> <td> <small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small> </td> <td> <small>Delete</small> <input type="checkbox"/> </td> </tr> <tr> <td> <small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small> </td> <td> <small>Delete</small> <input type="checkbox"/> </td> </tr> </table>			<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<small>Delete</small> <input type="checkbox"/>	PD FRANCO CARLOS 434 LANCASTER STREET BOCA RATON FL 33487		<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<small>Delete</small> <input type="checkbox"/>	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<small>Delete</small> <input type="checkbox"/>	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<small>Delete</small> <input type="checkbox"/>	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<small>Delete</small> <input type="checkbox"/>	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<small>Delete</small> <input type="checkbox"/>	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 2px;"> <small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small> </td> <td style="width: 50%; padding: 2px;"> <small>Change</small> <input type="checkbox"/> <small>Addition</small> <input type="checkbox"/> </td> </tr> <tr> <td> PD Sixto Carrillo 1206 S. Fed. Hwy Lot. 58 Delray Beach FL 33483 </td> <td></td> </tr> <tr> <td> <small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small> </td> <td> <small>Change</small> <input type="checkbox"/> <small>Addition</small> <input type="checkbox"/> </td> </tr> <tr> <td> <small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small> </td> <td> <small>Change</small> <input type="checkbox"/> <small>Addition</small> <input type="checkbox"/> </td> </tr> <tr> <td> <small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small> </td> <td> <small>Change</small> <input type="checkbox"/> <small>Addition</small> <input type="checkbox"/> </td> </tr> <tr> <td> <small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small> </td> <td> <small>Change</small> <input type="checkbox"/> <small>Addition</small> <input type="checkbox"/> </td> </tr> </table>			<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<small>Change</small> <input type="checkbox"/> <small>Addition</small> <input type="checkbox"/>	PD Sixto Carrillo 1206 S. Fed. Hwy Lot. 58 Delray Beach FL 33483		<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<small>Change</small> <input type="checkbox"/> <small>Addition</small> <input type="checkbox"/>	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<small>Change</small> <input type="checkbox"/> <small>Addition</small> <input type="checkbox"/>	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<small>Change</small> <input type="checkbox"/> <small>Addition</small> <input type="checkbox"/>	<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<small>Change</small> <input type="checkbox"/> <small>Addition</small> <input type="checkbox"/>
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<small>Delete</small> <input type="checkbox"/>																														
PD FRANCO CARLOS 434 LANCASTER STREET BOCA RATON FL 33487																															
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<small>Delete</small> <input type="checkbox"/>																														
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<small>Delete</small> <input type="checkbox"/>																														
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<small>Delete</small> <input type="checkbox"/>																														
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<small>Delete</small> <input type="checkbox"/>																														
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<small>Delete</small> <input type="checkbox"/>																														
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<small>Change</small> <input type="checkbox"/> <small>Addition</small> <input type="checkbox"/>																														
PD Sixto Carrillo 1206 S. Fed. Hwy Lot. 58 Delray Beach FL 33483																															
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<small>Change</small> <input type="checkbox"/> <small>Addition</small> <input type="checkbox"/>																														
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<small>Change</small> <input type="checkbox"/> <small>Addition</small> <input type="checkbox"/>																														
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<small>Change</small> <input type="checkbox"/> <small>Addition</small> <input type="checkbox"/>																														
<small>TITLE</small> <small>NAME</small> <small>STREET ADDRESS</small> <small>CITY-ST-ZIP</small>	<small>Change</small> <input type="checkbox"/> <small>Addition</small> <input type="checkbox"/>																														
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>Sixto Carrillo</u> <u>Sixto Carrillo</u> <u>1/28/04 (561) 276-1158</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																															