

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 13, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P01000004527

1. Entity Name  
PANADERIA LA MEXICANA AND RESTAURANT, INC.



Principal Place of Business  
527 ORANGE BLOSSOM TRAIL  
APOPKA, FL 32703

Mailing Address  
527 ORANGE BLOSSOM TRAIL  
APOPKA, FL 32703



01102006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3688100

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

HONORATO, ALEJANDRINO  
924 KHINGAN COURT  
APOPKA, FL 32712

**DO NOT WRITE  
IN THIS SPACE**

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: Agustin Honorato

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE 1/11/06

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE PD  
NAME HONORATO, ALEJANDRINO  
STREET ADDRESS 924 KHINGAN COURT  
CITY-ST-ZIP APOPKA, FL 32712

TITLE VPD  
NAME HONORATO, AGUSTIN  
STREET ADDRESS 1235 PLEASANTVIEW DR  
CITY-ST-ZIP APOPKA, FL 32703

TITLE SD  
NAME HONORATO, CATALINO  
STREET ADDRESS 1112 DAIMLER DR  
CITY-ST-ZIP APOPKA, FL 32712

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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NAME  
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CITY-ST-ZIP

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01/18/06-80029-001 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Agustin Honorato

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE 1/11/06

Daytime Phone #