2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000018038

1. Entity Name PACHECO ENTERPRISES, INC.



Principal Place of Business

Mailing Address

2021 S. 51ST STREET TAMPA, FL 33619

2021 S. 51ST STREET TAMPA, FL 33619

FILED Jan 20, 2006 8:00 am Secretary of State

01-20-2006 90034 029 ***150.00



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6. Name and Address of Current Registered Agent

No Chg-P CR2E034 (11/05) 01122006

Applied For 4. FEI Number 59-3238613 Not Applicable \$8.75 Additional

5. Certificate of Status Desired

Fee Required

PACHECO, ISMAEL 2021 S. 51ST STREET TAMPA, FL 33619

SIGNATURE: _

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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Finantity Trust Fund Contribution.				\$5.00 May Be Added to Fees	
10. FITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT P PACHECO, SR, ISMAEL 2021 S. 51ST STREET TAMPA, FL 33619	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
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.					