

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2008 8:00 am**  
**Secretary of State**

04-30-2008 90164 034 \*\*\*158.75

<b>DOCUMENT # P01000029029</b> 1. Entity Name EL RINCONCITO PAISA RESTAURANT, CORP.					
Principal Place of Business 4787 S.W. 154TH AVENUE MIAMI, FL 33185			Mailing Address 4787 S.W. 154TH AVENUE MIAMI, FL 33185		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 65-1087941			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input checked="" type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent  SEGURO, YERMIN CRISTIN G 4787 S.W. 154TH AVENUE MIAMI, FL 33185			7. Name and Address of New Registered Agent Name <u>Giraldo, Yermin Cristina</u> Street Address (P.O. Box Number is Not Acceptable) <u>4787 SW 154th Avenue.</u> City <u>Miami</u> FL Zip Code <u>33185</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		DATE <u>04-24-08</u>			
Signature, typed or printed name of registered agent and fee if applicable		(NOTE: Registered Agent signature required when reinstating)			
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GIRALDO, YERMIN C 4787 S.W. 154TH AVENUE MIAMI, FL 33185	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GIRALDO, DAYANA MARIA 4787 S.W. 154TH AVENUE MIAMI, FL 33185	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GIRALDO, JAMES ARNOLDO 4787 S.W. 154TH AVENUE MIAMI, FL 33185	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GIRALDO, JOHN SMITH 4787 S.W. 154TH AVENUE MIAMI, FL 33185	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
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		DATE <u>04-24-08</u>		Daytime Phone # <u>(786)385-3849</u>	
Signature and typed or printed name of signing officer or director		Date		Daytime Phone #	