


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 21, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000083320 1. Entity Name LA BODEGUITA TRADING COMPANY, INC.			
Principal Place of Business 1710 EAST SEVENTH AVE. TAMPA, FL 33605		Mailing Address 1710 EAST SEVENTH AVE. TAMPA, FL 33605	
DO NOT WRITE IN THIS SPACE			
04092004		No Chg-P	
CR2E034 (10/03)			
4. FEI Number NOT APPLICABLE		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			
HERCE, ROBERT A 1710 EAST SEVENTH AVE. TAMPA, FL 33605		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		U00000122192 04/21/04-80018-024 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERCE, ROBERT A 1710 EAST SEVENTH AVE. TAMPA, FL 33605	DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOPEZ, JOSEPH K 501 EAST KENNEDY BLVD., STE. 1600 TAMPA, FL 33602		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STINE, DONALD K 2509 TURKEY CREEK RD. PLANT CITY, FL 33567		
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 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: <i>Robert A. Herce</i>		4/19/04 (813) 241-6111	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	