

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 23, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P01000101255

Entity Name  
PEPITO'S RESTAURANT, INC.



Principal Place of Business  
57 HWY 98 E, UNIT 1  
DESTIN, FL 32541

Mailing Address  
757 HWY 98 E, UNIT 1  
DESTIN, FL 32541



01052006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3755035

Applied For  
Not Applicable

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

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

GUTIERREZ, ELISEO  
57 HWY 98 E, UNIT 1  
DESTIN, FL 32541

**DO NOT WRITE  
IN THIS SPACE**

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.

NATURE

N/A

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/19/06

**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

11000000397377  
01/30/06-80047-014 150.00

**OFFICERS AND DIRECTORS**

P  
BARRAGAN, JOSE L  
400 SDRANDVIEW DR  
PENSACOLA, FL 32514

VDS  
GUTIERREZ, ELISEO  
734 LEGION DR. APT 82  
DESTIN, FL 32541

ADDRESS  
CITY

ADDRESS  
CITY

ADDRESS  
CITY

ADDRESS  
CITY

**DO NOT WRITE  
IN THIS SPACE**

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.

NATURE:

*[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/19/06

Daytime Phone #