## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000017053

Entity Name: LOS BROTHERS RESTAURANT & CATERING, INC.

FILED Jul 11, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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4512 WOODLAND VILLAGE DRIVE 6004 HARDROCK CIRCLE DR ORLANDO, FL 32835

ORLANDO, FL 32819

**Current Mailing Address: New Mailing Address:** 

4512 WOODLAND VILLAGE DRIVE 6004 HARDROCK CIRCLE DR

ORLANDO, FL 32835 ORLANDO, FL 32819

FEI Number: 03-0384952 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PICHARDO, GLORIA PICHARDO, GLORIA 4512 WOODLAND VILLAGE DRIVE

6004 HARDROCK CIRCLE DR ORLANDO, FL 32835 US ORLANDO, FL 32819

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.

SIGNATURE: 07/11/2008

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:** 

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition Title: ( ) Delete Title: PICHARDO, SR, GUILLERMO PICHARDO, GUILLERMO SR Name: Name: 4512 WOODLAND VILLAGE DRIVE Address: 6004 HARDROCK CIRCLE DR Address:

City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ORLANDO, FL 32819

Title: VPD Title: VPD (X) Change ( ) Addition ( ) Delete Name: PICHARDO, GLORIA Name: PICHARDO, GLORIA

4512 WOODLAND VILLAGE DRIVE Address: 6004 HARDROCK CIRCLE DR Address:

ORLANDO, FL 32835 ORLANDO, FL 32819 City-St-Zip: City-St-Zip:

( ) Delete Title: Title: (X) Change ( ) Addition PICHARDO, SR, GUILLERMO Name: PICHARDO, GUILLERMO JR Name: 4512 WOODLAND VILLAGE DRIVE Address: 6004 HARDROCK CIRCLE DR Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ORLANDO, FL 32819

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: GUILLERMO PICHARDO 07/11/2008