


FILED

Apr 28, 2004 08:00 AM
Secretary of State

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P02000048489 1. Entity Name EL GALLITO MEXICANO, INC.	
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Principal Place of Business 3376 LAKE WORTH RD LAKE WORTH, FL 33461-3647	Mailing Address 3376 LAKE WORTH RD LAKE WORTH, FL 33461-3647
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04232004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 04-3649679	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FIGUEROA, SANDRA
3376 LAKE WORTH RD
LAKE WORTH, FL 33461-3647

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 Sandra Kios DATE 4/6/24

Signature, typed or printed name of registered agent etc. (Use 1 applicable) (NOTE: Registered Agent signature required when submitting)

**FILE NOW!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. \$5.00 May Be Added to Fees

000000135340
04/28/04-80055-013 8.75

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP FIGUEROA, SANDRA 3376 LAKE WORTH RD LAKE WORTH, FL 334613647
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DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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: Sandra Kios Date 4/6/24 (561) 371 3725

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR