

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000060316

Entity Name: EUSEBIO MENDOZA INC.

FILED  
Aug 07, 2005  
Secretary of State

## Current Principal Place of Business:

41 PALM CIRCLE DRIVE  
LAKE ALFRED, FL 33850

## New Principal Place of Business:

## Current Mailing Address:

41 PALM CIRCLE DRIVE  
LAKE ALFRED, FL 33850

## New Mailing Address:

FEI Number: 02-0610931

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MENDOZA, EUSEBIO  
41 PALM CIRCLE DRIVE  
LAKE ALFRED, FL 33850 US

## Name and Address of New Registered Agent:

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:

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:

Title: P ( ) Delete  
Name: MENDOZA, EUSEBIO  
Address: 41 PALM CIRCLE DRIVE  
City-St-Zip: LAKE ALFRED, FL 33850

Title: S ( ) Delete  
Name: GARCIA, JOSE T  
Address: 40 PALM CIR DRIVE  
City-St-Zip: LAKE ALFRED, FL 33850

Title: VP ( ) Delete  
Name: GARCIA PEREZ, OSCAR  
Address: 40 PALM CIR DRIVE  
City-St-Zip: LAKE ALFRED, FL 33850

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: EUSEBIO MENDOZA INC

P

08/07/2005

Electronic Signature of Signing Officer or Director

Date