## **2005 FOR PROFIT CORPORATION** ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNI

## Apr 28, 2005 8:00 am Secretary of State DOCUMENT # P02000088304 04-28-2005 90200 004 \*\*\*150.00 GAUCHOS STEAK HOUSE, INC. Principal Place of Business Mailing Address TANAMART 200X NX EDERALNHAN 2700 SOMERSET DRIVE KANAMENIAK KEREBERAK KANAMEN KEREBERAK KEREBER **APT # Y112** LAUDERDALE LAKES, FL 33311 2. Principal Place of Business 3. Mailing Address **NO BUSINESS PLACE** Suite, Apt. #, etc. Suite, Apt. #, etc. 04162005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 52-2370216 Not Applicable Country Zio Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SALES, MARIO P Street Address (P.O. Box Number is Not Acceptable) 2700 SOMERSET DRIVE APT # Y 112 LAUDERDALE LAKES, FL 33311 City Zip Code FI 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. □ Delete ☐ Change ☐ Addition TITLE TITLE TEMPESTINI, ROBERTO NAME NAME 2642 COLLINS AVE #304 STREET ADDRESS STREET ADDRESS MIAMI BCH, FL 33140 CITY-ST-ZIP CITY-ST-ZIP D VP Change TITLE X Delete TITLE Addition GSOTTSCHNEIDER, GUILLERMO NAME NAME STREET ADDRESS 2110 N OCEAN BLVD MB 702 STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE, FL 33305 CiTY-ST-ZIP DPST TITLE □ Delete TITLE Change ■ Addition SALES, MARIO P NAME NAME 2700 SOMERSET DRIVE APT # Y 112 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAUDERDALE LAKES, FL 33311 CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLÉ ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

**FILED**