## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000107661

City-St-Zip:

PALM BEACH GARDENS, FL 33418

Entity Name: EL TORO MEXICAN FAMILY RESTERAUNT III, INC.

FILED Jul 11, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1664 ST. RD 288 ZELIENOPLE, PA 16063 **Current Mailing Address: New Mailing Address:** 626 ROSSMOOR CIRCLE MELBOURNE, FL 32940 FEI Number: 16-1631679 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: BOUVIER, PAUL A 3210 N. WICKHAM ROAD SUITE 5 MELBOURNE, FL 32935 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition JESSEMAN, BILL JESSEMAN, BILL Name: Name: 626 ROSSMOOE CIRCLE 626 ROSSMOOR CIRCLE Address: Address: City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: MELBOURNE, FL 32940 Title: VΡ (X) Delete Title: () Change () Addition Name: JESSEMAN, TIMOTHY J Name: 1388 ROUTE 588 Address: Address: FOMBELL, PA 16123 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition LOPEZ, JOSE Name: Name: 702 VISION TERRACE Address: Address:

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.

City-St-Zip:

SIGNATURE: BILL JESSEMAN P 07/11/2005