


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000109716

1. Entity Name
SAN FRANCISCO EL DORADO, INC.



Principal Place of Business Mailing Address

2300 CORAL WAY **2300 CORAL WAY**
SUITE #200 **SUITE #200**
MIAMI, FL 33145 **MIAMI, FL 33145**

DO NOT WRITE IN THIS SPACE



01052005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
16-1654138 Not Applicable


5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

FLORIDA ANNUAL REPORT SERVICES, INC.
2300 CORAL WAY
SUITE 200
MIAMI, FL 33145

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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  **AMADA CANJERA LOPEZ, PRESIDENT** DATE **3/22/05**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when retitling) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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


10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MORENO, DIMAS N
STREET ADDRESS	2303 N.W. 3RD STREET
CITY-ST-ZIP	MIAMI, FL 33125
TITLE	VD
NAME	MORENO, ROSA M
STREET ADDRESS	2303 N.W. 3RD STREET
CITY-ST-ZIP	MIAMI, FL 33125
TITLE	SD
NAME	RIVAS, JAIME A
STREET ADDRESS	9741 S.W. 3RD STREET
CITY-ST-ZIP	MIAMI, FL 33174
TITLE	TD
NAME	RIVAS, ELSY
STREET ADDRESS	9741 S.W. 3RD STREET
CITY-ST-ZIP	MIAMI, FL 33174
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/04/05-80080-018 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  DATE **2/10/05** Daytime Phone #

ROSA MORENO, VICE-PRESIDENT