

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90395 022 ***150.00



DOCUMENT # P02000113425
 1. Entity Name
YLLACITO CORPORATION

Principal Place of Business
**7452 SW 120TH STREET
 GAINESVILLE, FL 32608**

Mailing Address
**6910 W. UNIVERSITY AVE, STE #2
 GAINESVILLE, FL 32607**

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
7452 S.W. 120TH STREET
 Suite, Apt. #, etc.

City & State
GAINESVILLE FL

Zip
32608

Country
U.S.A.

40001000

04252008 Chg-P CR2E034 (12/06)

6. Name and Address of Current Registered Agent

**YNIGO, PETER Y
 3707 SW 97TH WAY
 GAINESVILLE, FL 32608**

4. FEI Number
14-1860362

Applied For
 Not Applicable

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

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
7452 SW 120TH STREET

City
GAINESVILLE, FL

Zip Code
32608

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	P	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	YNIGO, PETER Y			NAME			
STREET ADDRESS	7452 SW 120TH STREET			STREET ADDRESS			
CITY-ST-ZIP	GAINESVILLE, FL 32608			CITY-ST-ZIP			
TITLE	VP	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	YNIGO, PEDRO E			NAME			
STREET ADDRESS	7452 SW 120TH STREET			STREET ADDRESS			
CITY-ST-ZIP	GAINESVILLE, FL 32608			CITY-ST-ZIP			
TITLE	S	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	YNIGO, AURORA			NAME			
STREET ADDRESS	7452 SW 120TH STREET			STREET ADDRESS			
CITY-ST-ZIP	GAINESVILLE, FL 32608			CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> 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 exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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: _____ **04/24/08** **352-495-4259**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #