

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 16, 2007 8:00 am**  
**Secretary of State**

05-16-2007 90015 006 \*\*\*150.00

**DOCUMENT # P02000116774**

1. Entity Name  
**EL MEXICANISIMO, INC.**



Principal Place of Business  
**364 STORY RD.  
OCOE, FL 34761**

Mailing Address  
**364 STORY RD.  
OCOE, FL 34761**

**40114347**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05012007

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number

**04-3722455**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PINEDA, OSCAR  
364 STORY RD.  
OCOE, FL 34761**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**PSD  
PINEDA, OSCAR  
364 STORY RD.  
OCOE, FL 34761** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**VP  
AWARADO, LUCINA  
364 W STORY RD  
OCOE, FL 34761** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**VP  
AWARADO, LUCINA  
364 W STORY RD  
OCOE, FL 34761** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**VP  
AWARADO, LUCINA  
364 W STORY RD  
OCOE, FL 34761** ☐ Delete

TITLE  
NAME  
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**VP  
AWARADO, LUCINA  
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**VP  
AWARADO, LUCINA  
364 W STORY RD  
OCOE, FL 34761** ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**VP  
AWARADO, LUCINA  
364 W STORY RD  
OCOE, FL 34761** ☒ Change ☐ Addition

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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 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/30/07**

Date

**407-877-3374**

Daytime Phone #