

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

7006 0100 0007 338 **FILED**

Apr 25, 2008 08:00 AM
Secretary of State

DOCUMENT # P02000130565

1. Entity Name
CORNEJO RACING, INC.



Principal Place of Business
**2699 S BAYSHORE DR
5TH FLOOR
MIAMI, FL 33133**

Mailing Address
**2699 S BAYSHORE DR
5TH FLOOR
MIAMI, FL 33133**



04152008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
06-1666189

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**DEVINE GOODMAN PALLOT & WELLS, P.A.
777 BRICKELL AVE
SUITE 850
MIAMI, FL 33131**

**DO NOT WRITE
IN THIS SPACE**

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

TITLE **D**
NAME **GARCIA-CORNEJO, HECTOR**
STREET ADDRESS **PICACHO NO 127 COL JARDINES DEL PEDREGAL**
CITY-ST-ZIP **MEXICO,**

TITLE
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05/14/08-80046-005 150.00

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IN THIS SPACE**

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

Date

Daytime Phone #

April 16, 2008 (305) 8605125