

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000073835

**FILED**  
**Sep 20, 2010**  
**Secretary of State**

**Entity Name:** EL POTRO MEXICAN RESTAURANT #E-1, INC.

**Current Principal Place of Business:**

5871 UNIVERSITY BOULEVARD WEST  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

**Current Mailing Address:**

5871 UNIVERSITY BOULEVARD WEST  
JACKSONVILLE, FL 32216

**New Mailing Address:**

**FEI Number:** 86-1072166

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DAVID, LOUIS  
12627 SAN JOSE BLVD.  
SUITE #306  
JACKSONVILLE, FL 32223 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** ESCAMILLA, NICOLAS  
**Address:** 2758 LANTANA LAKES DRIVE  
**City-St-Zip:** JACKSONVILLE, FL 32246

**Title:** D  
**Name:** ESCAMILLA, ALFREDO  
**Address:** 5669 BENEY ROAD  
**City-St-Zip:** JACKSONVILLE, FL 322077415

**Title:** D  
**Name:** ESCAMILLA, JOSE D  
**Address:** 14613 CAMBERWELL LANE SOUTH  
**City-St-Zip:** JACKSONVILLE, FL 322580001

I hereby 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 all other like empowered.

**SIGNATURE:** JOSE ESCAMILLA

MR

09/20/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date