## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

## May 02, 2005 8:00 am Secretary of State DOCUMENT # P03000088787 05-02-2005 90531 021 \*\*\*150.00 MI PÚEBLITO CONVENIENCE STORE, INC. Principal Place of Business Mailing Address 50046083 2315 55TH AVENUE WEST 2315 55TH AVENUE WEST BRADENTON, FL 34207 BRADENTON, FL 34207 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04202005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 33-1067837 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RODRIGUEZ, ANTONIA Street Address (P.O. Box Number is Not Acceptable) 2315 55TH AVENUE WEST BRADENTON, FL 34207 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11 TITLE TITLE ☐ Delete Change ☐ Addition RODRIGUEZ, ANTONIA NAME NAME 2315 55TH AVENUE WEST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34207 CITY-ST-ZIP TITLE Change ☐ Addition **ESQUIVEL, MARCELINO** NAME NAME STREET ADDRESS 2315 55TH AVENUE WEST STREET ADORESS CLTY-ST-ZIP BRADENTON, FL 34207 CITY-ST-ZIP TITEF Delete TITLE RODEIGUEZ, ROSA NAME NAME 925 61ST AVE. CIR. E. BRADENTOW, FL 341703 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-719 RYER, SANTIAGO 1315 SSIL AVE WEST 34207 TITLE ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS City-SI-78 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ 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 exemption stated in Section 119.07(3)(i). 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.

**FILED**