## **2008 FOR PROFIT CORPORATION**

## Apr 28, 2008 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT # P03000095744** 04-28-2008 90371 048 \*\*\*150.00 1. Entity Name TORTILLERIA & PALETERIA MI MEXICO, INC. 4000000 Principal Place of Business Mailing Address 387 E MAIN STREET 387 E MAIN STREET APOPKA, FL 32703 APOPKA, FL 32703 DO NOT WRITE IN THIS SPACE 04222008 No Chg-P CR2E034 (11/05) Applied For 4. FFI Number 06-1706192 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BARRAGAN, RAQUEL DO NOT WRITE 387 E MAIN ST. APOPKA, FL 32703 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE BARRAGAN, RAQUEL NAME 387 E MAIN ST STREET ADDRESS CITY-ST-ZIP APOPKA, FL 32703 TITLE BARRAGAN, NORBEL NAME STREET ADDRESS 387 E MAIN ST CITY-ST-ZIP APOPKA, FL 32703 TITI F NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITI F NAME STREET ADDRESS CITY-ST-ZIP TITI E NAME STREET ADDRESS 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 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.

NAME STREET ADDRESS CITY-ST-ZIP

Daytime Phone #

**FILED**