

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000118808

FILED
Apr 15, 2004
Secretary of State

Entity Name: MILAGROS VILLAGE RESTAURANT, INC.

Current Principal Place of Business:

17085 PINEE BLVD
PEMBROKE PINES, FL 33028

New Principal Place of Business:

17085 PINES BLVD
PEMBROKE PINES, FL 33028

Current Mailing Address:

17085 PINEE BLVD
PEMBROKE PINES, FL 33028

New Mailing Address:

17085 PINES BLVD
PEMBROKE PINES, FL 33028

FEI Number: 76-0744507

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARCELINO, GERALD
17085 PINEE BLVD
PEMBROKE PINES, FL 33028

Name and Address of New Registered Agent:

MARCELINO, GERALD
17085 PINES BLVD
PEMBROKE PINES, FL 33028

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: MARCELINO GERALD

04/15/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ESPINAL, MILAGROS
Address: 17085 PINEE BLVD
City-St-Zip: PEMBROKE PINES, FL 33028

Title: SD () Delete
Name: MARCELINO, GERALD
Address: 17085 PINEE BLVD
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ESPINAL, MILAGROS
Address: 17085 PINES BLVD
City-St-Zip: PEMBROKE PINES, FL 33028

Title: SD (X) Change () Addition
Name: MARCELINO, GERALD
Address: 17085 PINES BLVD
City-St-Zip: PEMBROKE PINES, FL 33028

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: MILAGROS ESPINAL

PD

04/15/2004

Electronic Signature of Signing Officer or Director

Date