


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**

**May 01, 2006 08:00-A**  
**Secretary of State**

DOCUMENT # P03000129020 1. Entity Name EL NICOYITA DISCOUNT, CORP.	
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Principal Place of Business 1401 WEST FLAGLER STREET MIAMI, FL 33135	Mailing Address 1401 WEST FLAGLER STREET MIAMI, FL 33135
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04242006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 20-0383657	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  DAVILA, HORTENCIA 837 NW 1ST APT 2 MIAMI, FL 33128
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**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: *Hortencia Davila* 4/24/06  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing ☐ \$5.00 May Be  
Trust Fund Contribution. Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DAVILA, HORTENCIA 837 NW 1ST APT 2 MIAMI, FL 33128
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RODRIGUEZ, REYNA 421 EAST 63RD STREET HIALEAH, FL 33013
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05/15/06-80046-020 150.00

**DO NOT WRITE  
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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: *Hortencia Davila* *Hortencia Davila - Reg. 4/24/06 305-643-3539*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #