

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90481 007 ***150.00

DOCUMENT # P03000130928

1. Entity Name
EL POLLO RICO RESTAURANT, INC.



Principal Place of Business

16840 SW 92ND AVE
MIAMI, FL 33157

Mailing Address

16840 SW 92ND AVE
MIAMI, FL 33157

50017844



04222006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0351308

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

COTRINA DIAZ, ALICIA
16840 SW 92ND AVE
MIAMI, FL 33157

**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

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
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PT
NAME	COTRINA, CARLOS A
STREET ADDRESS	16840 SW 92ND AVE
CITY-ST-ZIP	MIAMI, FL 33157
TITLE	V
NAME	COTRINA DIAZ, SEGUNDO S
STREET ADDRESS	16840 SW 92ND AVE
CITY-ST-ZIP	MIAMI, FL 33157
TITLE	T
NAME	COTRINA, JESUS R
STREET ADDRESS	16840 SW 92ND AVE
CITY-ST-ZIP	MIAMI, FL 33157
TITLE	S
NAME	COTRINA DIAZ, ALICIA
STREET ADDRESS	16840 SW 92ND AVE
CITY-ST-ZIP	MIAMI, FL 33157
TITLE	D
NAME	COTRINA DIAZ, CARLOS A
STREET ADDRESS	16840 SW 92ND AVE
CITY-ST-ZIP	MIAMI, FL 33157
TITLE	D
NAME	COTRINA DIAZ, GERMAN N
STREET ADDRESS	16840 SW 92ND AVE
CITY-ST-ZIP	MIAMI, FL 33157

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IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/23/06

Date

305-251-6363

Daytime Phone #

ATTACHMENT 50017844
#PD3000130928

GOC Accounting & Tax Services, LLC

April 23, 2006

Division of Corporations
P. O. Box 1500
Tallahassee, FL 32302-1500

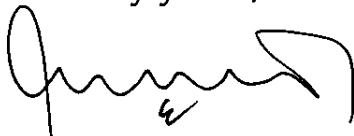
RE.: El Pollo Rico Restaurant, Inc.
FEIN 20-0351308
2006 Annual Report

Gentlemen:

Enclosed please find above-mentioned report duly completed and signed for my client El Pollo Rico Restaurant, Inc. We are also enclosing our check in the amount of \$ 150.00 to cover the fee for this report.

Should you need any further information, please do not hesitate to contact the undersigned.

Cordially yours,



Guillermo O. Correas

Enclosure: as indicated above