

PO3000150888

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

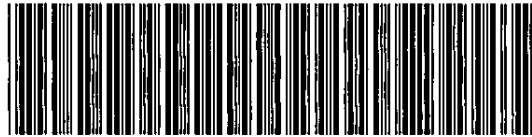
(Business Entity Name)

(Document Number)

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07 JUL -2 AM 11:33
OFFICE OF CORPORATIONS
DIVISION OF REVENUE
TALLAHASSEE, FLORIDA

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2007 JUL -2 PM 3:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DR
7/2/07

**LAZARUS
CORPORATE FILING SERVICE**

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MIAMI, FL 33165 (305) 552-5973

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. EL CONDOR FOOD, CORP.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

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NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☒ Dissolution/Withdrawal
- ☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

FILED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[illegible]

The document number of the corporation (if known): P03000150888

The date dissolution was authorized: 05/30/2007

Effective date of dissolution if applicable: 05/30/2007

(no more than 90 days after dissolution file date)

Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

Ibeth Martinez

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

(Typed or printed name of person signing)

Age Group	Total (%)	Female (%)	Male (%)	Under 18 (%)	18-24 (%)
18-24	~1.5	~1.5	~1.5	~1.5	~1.5
25-34	~1.5	~1.5	~1.5	~1.5	~1.5
35-44	~1.5	~1.5	~1.5	~1.5	~1.5
45-54	~1.5	~1.5	~1.5	~1.5	~1.5
55-64	~1.5	~1.5	~1.5	~1.5	~1.5
65-74	~1.5	~1.5	~1.5	~1.5	~1.5
75-84	~1.5	~1.5	~1.5	~1.5	~1.5
85+	~1.5	~1.5	~1.5	~1.5	~1.5

(Title of person signing)

Filing Fee: \$35