

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2007 08:00 A
Secretary of State

DOCUMENT # P04000004661

1. Entity Name

LA SABROSA TORTILLA FACTORY, INC.



Principal Place of Business

3406 WEST BAKER STREET
PLANT CITY, FL 33566 US

Mailing Address

3406 WEST BAKER STREET
PLANT CITY, FL 33566 US



04182007 No Chg-P CR2E034 (11/05)

4. FEI Number

84-1634406

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PERALES, ALEJANDRO
3206 GLORIA AVE
PLANT CITY, FL 33567

**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

U000000750402
05/18/07-80056-035 150.00

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000750402
05/18/07-80056-034 8.75

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D.C PERALES, ALEJANDRO 3206 GLORIA AVE PLANT CITY, FL 33567
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P.V.P PERALES, ALEJANDRO 3206 GLORIA AVE PLANT CITY, FL 33567
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T.S PERALES, ALEJANDRO 3206 GLORIA AVE PLANT CITY, FL 33567
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
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 687, 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

Date

Daytime Phone #

Alejandro Peral 4-23-07 956 784-0615