


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 24, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000020665
 1. Entity Name
 TAQUITOS CHIHUAHUA CORP.



Principal Place of Business Mailing Address
 11127 W. COLONIAL DR. 11127 W. COLONIAL DR.
 OCOEE, FL 34761 OCOEE, FL 34761

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State

4. FEI Number Applied For
 20-0622048 Not Applicable

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

6. Name and Address of Current Registered Agent
 CACHU, JOSE A
 1221 DEMOISELLE ST
 GROVELAND, FL 34736

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PSTD Delete
 NAME CACHU, JOSE A
 STREET ADDRESS 11127 W. COLONIAL DR.
 CITY-ST-ZIP OCOEE, FL 34761

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
 TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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



07202006 Chg-P CR2E034 (11/05)

U00000572058
 07/25/06-80014-023 150.00

7/20/06

Date Daytime Phone #