


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 18, 2007 08:00 AM
Secretary of State

DOCUMENT # P04000024881 1. Entity Name SOMBRERO, INC.	
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Principal Place of Business 1330 U.S. 301 NORTH PALMETTO, FL 34221	Mailing Address 1330 U.S. 301 NORTH PALMETTO, FL 34221
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DO NOT WRITE IN THIS SPACE



03242007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0705895	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent FOSTER, JOHN 1330 U.S. 301 NORTH PALMETTO, FL 34221

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES VALLE, CLAUDIA 1330 U.S. 301 NORTH PALMETTO, FL 34221
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VALLE, CLAUDIA 1330 U.S. 301 NORTH PALMETTO, FL 34221
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC FOSTER, JOHN 1330 U.S. 301 NORTH PALMETTO, FL 34221
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRES FOSTER, JOHN 1330 US 301 NORTH PALMETTO, FL 34221
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FOSTER, JOHN 1330 US 301 NORTH PALMETTO, FL 34221
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VALLE JR, RUBEN 1330 US 301 NORTH PALMETTO, FL 34221

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IN THIS SPACE**

U000000714728
04/27/07-80034-014 150.00

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:  **4-12-07**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #