

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000055893

Entity Name: DOS GORDITOS, INC.

FILED
Jun 18, 2009
Secretary of State

Current Principal Place of Business:

951 BRICKELL AVE, 405
MIAMI, FL 33131 US

New Principal Place of Business:

51 SW 11TH ST #725
MIAMI, FL 33130 US

Current Mailing Address:

951 BRICKELL AVE, 405
MIAMI, FL 33131 US

New Mailing Address:

51 SW 11TH ST #725
MIAMI, FL 33130 US

FEI Number: 20-0949231

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASCOLI, MARIA R
51 S.W. 11TH STREET
#1420
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

ASCOLI, MARIA R
51 S.W. 11TH STREET
#725
MIAMI, FL 33130 US

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.

SIGNATURE: MARIA ASCOLI

06/18/2009

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: CORONADO, RODRIGO
Address: 51 SW 11TH STREET #1420
City-St-Zip: MIAMI, FL 33130 US

Title: P () Delete
Name: ASCOLI, MARIA R
Address: 51 SW 11TH STREET #1420
City-St-Zip: MIAMI, FL 33130 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: CORONADO, RODRIGO
Address: 51 SW 11TH STREET #725
City-St-Zip: MIAMI, FL 33130 US

Title: P (X) Change () Addition
Name: ASCOLI, MARIA R
Address: 51 SW 11TH STREET #725
City-St-Zip: MIAMI, FL 33130 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARIA ASCOLI

P

06/18/2009

Electronic Signature of Signing Officer or Director

Date