

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 04, 2007 8:00 am**  
**Secretary of State**

04-04-2007 90182 005 \*\*\*150.00

**DOCUMENT # P04000099508**

1. Entity Name  
**SAN EDUARDO ORLANDO HOLDINGS, INC.**



Principal Place of Business

**300 S EOLA DR  
ORLANDO, FL 32801**

Mailing Address

**300 S EOLA DR  
ORLANDO, FL 32801**

**40050246**



2. Principal Place of Business - No P.O. Box #

**205 S. Eola Dr**

3. Mailing Address

**205 S. Eola Dr**

Suite, Apt. #, etc.

**Suite B**

Suite, Apt. #, etc.

**Suite B**

03212007

Chg-P

CR2E034 (12/06)

City & State

**Orlando, FL**

City & State

**Orlando, FL**

4. FEI Number

**90-0224422**

Applied For

Not Applicable

Zip

**32801**

Country

**USA**

Zip

**32801**

Country

**USA**

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**SCHLITT, KENNETH L  
749 N GARLAND AVE STE 100  
ORLANDO, FL 32801**

7. Name and Address of New Registered Agent

Name

**Chaney B Gordy, Jr**

Street Address (P.O. Box Number is Not Acceptable)

**205 S. Eola Dr, suite B**

City

**Orlando**

**FL**

**Zip Code  
32801**

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

**3/21/07**

**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**

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	<b>SUAREZ, MARIA M</b>	
STREET ADDRESS	<b>300 S EOLA DR</b>	
CITY-ST-ZIP	<b>ORLANDO, FL 32801</b>	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	<b>ROSITTO, MARIA P</b>	
STREET ADDRESS	<b>300 S EOLA DR</b>	
CITY-ST-ZIP	<b>ORLANDO, FL 32801</b>	
TITLE	D	<input type="checkbox"/> Delete
NAME	<b>ROSITTO, MARIA P</b>	
STREET ADDRESS	<b>300 S EOLA DR</b>	
CITY-ST-ZIP	<b>ORLANDO, FL 32801</b>	
TITLE	D	<input type="checkbox"/> Delete
NAME	<b>DUVAL, CARLOS D</b>	
STREET ADDRESS	<b>300 S EOLA DR</b>	
CITY-ST-ZIP	<b>ORLANDO, FL 32801</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	<b>205 S. Eola Dr suite B</b>	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	<b>205 S. Eola Dr suite B</b>	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	<b>205 S. Eola Dr suite B</b>	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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

Date

Daytime Phone #

**3/21/07**