2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 07, 2009
Secretary of State

DOCUMENT# P04000137608

Entity Name: HABANEROS #2 MEXICAN RESTAURANT, INC.

Current Principal Place of Business:

1265 STATE ROAD 436 EAST
CASELBERRY, FL 32707 US

New Principal Place of Business:

Current Mailing Address:

1265 STATE ROAD 436 EAST
CASELBERRY, FL 32707 US

New Mailing Address:

FEI Number: 20-1701188 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAYORGA, AUGUST C
243 W KENNEDY BLVD
SUITE C
ORLANDO, FL 32810 US

Name and Address of New Registered Agent:

IBARRA, JORGE L
1265 STATE ROAD 436 EAST
CASELBERRY, FL 32779 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: JORGE IBARRA 08/07/2009
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: P ( ) Delete
Name: IBARRA, JORGE
Address: 220 WEKIVA SPRINGS ROAD
City-St-Zip: LONGWOOD, FL 32779 US

Title: VP ( ) Delete
Name: IBARRA, SAMUEL
Address: 220 WEKIVA SPRINS ROAD
City-St-Zip: LONGWOOD, FL 32779 US

Title: VP ( ) Delete
Name: SALAZAR, JOEL
Address: 1021 REGEL COURT
City-St-Zip: OVIEDO, FL 32765 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JORGE IBARRA P 08/07/2009
Electronic Signature of Signing Officer or Director Date