

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P04000159873

1. Entity Name  
COLOMBIAN PIZZA AND FAST FOOD, CORP



Principal Place of Business  
8648 NW 44TH STREET  
SUNRISE, FL 33351

Mailing Address  
1399 S UNIVERSITY DR  
PLANTATION, FL 33324

**DO NOT WRITE IN THIS SPACE**

**40047361**



02192008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1940390	Applied For Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

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

**DO NOT WRITE  
IN THIS SPACE**

**10. OFFICERS AND DIRECTORS**

TITLE D  
NAME CUELLAR, JORGE  
STREET ADDRESS 4070 SW 97 PL  
CITY-ST-ZIP MIAMI, FL 33165

TITLE VSD  
NAME ESPINOZA, ELIGIO A  
STREET ADDRESS 3821 POND APPLE DRIVE  
CITY-ST-ZIP WESTON, FL 33332

TITLE  
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:

*Jorge Cuellar*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-13-08

Date

Daytime Phone #