

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Sep 06, 2006 8:00 am**  
**Secretary of State**

09-06-2006 90036 041 \*\*\*158.75

**DOCUMENT # P05000075621**

1. Entity Name  
**FLORIDA CHURROS COMPANY**



Principal Place of Business  
**2471 CANDLEWICK STREET  
DELTONA, FL 32738**

Mailing Address  
**2471 CANDLEWICK STREET  
DELTONA, FL 32738**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

08302006

Chg-P

CR2E034 (11/05)

4. FEI Number

**202896878**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SILVA, HENRY  
2471 CANDLEWICK STREET  
DELTONA, FL 32738**

Name

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

City

**FL**

Zip Code

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  
Due by September 6, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

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

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
NAME **D**  
STREET ADDRESS **SILVA, HENRY**  
CITY-ST-ZIP **2471 CANDLEWICK STREET  
DELTONA, FL 32738**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ 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

**HENRY SILVA**

**8/28/06 407-929-6186**

Date

Daytime Phone #

ATTACHMENT

40102960

August 27<sup>th</sup>, 2006

#P05080075621

Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Florida Churros Company  
2471 Candlewick St.  
Deltona, Florida 32738  
F.E.I # 202896878

To Whom It May Concern:

With this letter I am mailing you the 2006 Corporation Annual Report for **Florida Churros Company**; I did not receive the notice to mail it before May 2006. The only notice I have received so far was the Notice of Intent to Dissolve.

I am including a check in the amount of \$158.75 to cover the filing fee and the certificate of status. If you need to reach me for any reason you can call me at (407) 929-6186

Thank you,

Henry Silva