

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 20, 2006 8:00 am**  
**Secretary of State**

07-20-2006 90001 031 \*\*\*158.75

40100220



07172006 Chg-P CR2E034 (11/05)

4. FEI Number **14-1969973** Applied For  
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required

**DOCUMENT # P05000078741**  
1. Entity Name  
**LOS GUERRERO'S DEL LA SALSA INC.**



Principal Place of Business  
**141 NW 77TH AVENUE  
MARGATE, FL 33063**

Mailing Address  
**141 NW 77TH AVENUE  
MARGATE, FL 33063**

2. Principal Place of Business  
*Same*

3. Mailing Address  
*Same*

Suite, Apt. #, etc.  
City & State

Zip Country Zip Country

**6. Name and Address of Current Registered Agent**  
  
**GUERRERO, MARIA  
141 NW 77TH AVENUE  
MARGATE, FL 33063**

**7. Name and Address of New Registered Agent**  
Name *Same*  
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 \_\_\_\_\_ (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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/D GUERRERO, JOSE 141 NW 77TH AVENUE MARGATE, FL 33063 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP/D GUERRERO, MARIA 141 NW 77TH AVENUE MARGATE, FL 33063 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T/S GUERRERO, MARIA 141 NW 77TH AVENUE MARGATE, FL 33063 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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:** *Maria C Guerrero* **7-18-06** **954-969-5548**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #