

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000136041

1. Entity Name
EL RANCHITO JALISCO II CORP



Principal Place of Business
19542 CORTEZ BLVD
BROOKSVILLE, FL 34601

Mailing Address
19542 CORTEZ BLVD
BROOKSVILLE, FL 34601

FILED

07 SEP 14 AM 11:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03232007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 22-3893010	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CAMPOS, JUAN
19542 CORTEZ BLVD
BROOKSVILLE, FL 34601

**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, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

100109723247
20/07--01070--002 **150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CAMPOS, JUAN 19542 CORTEZ BLVD BROOKSVILLE, FL 34601
--	---

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CAMPOS, JOSE 19542 CORTEZ BLVD BROOKSVILLE, FL 34601
--	--

TITLE NAME STREET ADDRESS CITY-ST-ZIP	
--	--

TITLE NAME STREET ADDRESS CITY-ST-ZIP	
--	--

TITLE NAME STREET ADDRESS CITY-ST-ZIP	
--	--

TITLE NAME STREET ADDRESS CITY-ST-ZIP	
--	--

\$79/14

**DO NOT WRITE
IN THIS SPACE**

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: X JUAN CAMPOS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

09-10-07

Date

Daytime Phone #