

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000163472

FILED
Apr 09, 2007
Secretary of State

Entity Name: CINCO DE MAYO MEXICAN KITCHEN, INC.

Current Principal Place of Business:

2050 E. IRLO BRONSON MEMORIAL HHIGHWAY
KISSIMMEE, FL 34744

New Principal Place of Business:

2050 E. IRLO BRONSON MEMORIAL HIGHWAY
KISSIMMEE, FL 34744

Current Mailing Address:

C/O 1200 BRICKELL AVENUE
SUITE 900
MIAMI, FL 33131

New Mailing Address:

FEI Number: 20-3931826 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGI REGISTERED AGENTS, INC.
1200 BRICKELL AVENUE
SUITE 900
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PARTIDA, ALBERTO
Address: 2050 E. IRLO BRONSON MEMORIAL HHIGHWAY
City-St-Zip: KISSIMMEE, FL 34744

Title: VD () Delete
Name: PARTIDA, ARACELIS
Address: 2050 E. IRLO BRONSON MEMORIAL HHIGHWAY
City-St-Zip: KISSIMMEE, FL 34744

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PARTIDA, ALBERTO
Address: 2050 E. IRLO BRONSON MEMORIAL HIGHWAY
City-St-Zip: KISSIMMEE, FL 34744

Title: VD (X) Change () Addition
Name: PARTIDA, ARACELIS
Address: 2050 E. IRLO BRONSON MEMORIAL HIGHWAY
City-St-Zip: KISSIMMEE, FL 34744

I hereby certify that the information supplied with this filing does not qualify for the 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: ALBERTO PARTIDA

P/D

04/09/2007

Electronic Signature of Signing Officer or Director

Date