

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000020524

Entity Name: JARAGUA RESTAURANT INC.

FILED
Oct 14, 2008
Secretary of State

Current Principal Place of Business:

1298 NW 29TH ST
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

1298 NW 29TH ST
MIAMI, FL 33142

New Mailing Address:

FEI Number: 20-4595441

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NUNEZ, MARIA I
1298 NW 29TH ST
MIAMI, FL 33142 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: MARIA NUNEZ

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: NUNEZ, MARIA I
Address: 116 NE 162 ST N
City-St-Zip: MIAMI BCH, FL 33162

Title: DV () Delete
Name: CHARLES, MAUUEL
Address: 116 NE 162 ST N
City-St-Zip: MIAMI BCH, FL 33162

Title: DT () Delete
Name: CORONADO, VISTOR
Address: 879 E 20 ST
City-St-Zip: HIALEAH, FL 33010

Title: DS () Delete
Name: PASTRANA, SONIA
Address: 1053 NW 32 ST
City-St-Zip: MIAMI, FL 33127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MANUEL CHARLES

DV

10/14/2008

Electronic Signature of Signing Officer or Director

Date