

FILED
Jul 28, 2008 8:00 am
Secretary of State

07-28-2008 90031 018 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0600023734	
1. Entity Name	
EL ASADOR RESTAURANT INC	

DO NOT WRITE IN THIS SPACE

60045533

2. Principal Place of Business 10201 HAMMOCKS BLVD # 119	3. Mailing Address SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State MIAMI, FL	City & State SAME	4. FEI Number 76-0820680	Applied For Not Applicable
Zip 33196-3783	Country USA	Zip SAME	Country USA
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name JANET APICELLA
Street Address (P.O. Box Number is Not Acceptable) 15125 SW 74 AVENUE
City MIAMI
FL
Zip Code 33158

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

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JANET APICELLA 15125 SW 74TH AVE MIAMI FL 33158	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP NORBERTO I BASUALDO 4820 SW 152 PL APT E MIAMI FL 33185	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:  **NORBERTO I BASUALDO** **1/21/2008** **305-385-5885**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

60045533

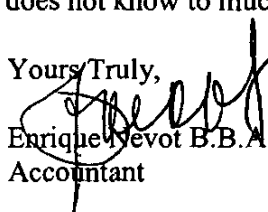
Florida Department of State
Division of Corporations
Subject: El Asador Restaurant Inc.

Reference Number PO6000023734

The enclose letter was gave to me by the above customer.

I hope that the Division of Corporations will take the payment check for this year UBR, due to the fact that the owner of the this small restaurant does not know to much about English Language

Yours Truly,


Enrique Nevot B.B.A
Accountant