

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000036786

1. Entity Name
FIESTA MARIACHI, INC.



Principal Place of Business

12189 US HWY 1
SUITE 32
NORTH PALM BEACH, FL 33408 US

Mailing Address

12189 US HWY 1
SUITE 32
NORTH PALM BEACH, FL 33408 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite 31

Suite, Apt. #, etc.

Suite 31

City & State

City & State

Zip

Country

Zip

Country



REINSTATEMENT

04052007-1648-8 11/28/04 (12/06) 07

4. FEI Number

20-4531991

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MARTINEZ, JAVIER
2371 SW LAWFORD ST.
PORT ST. LUCIE, FL 34953

Name

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

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME MARTINEZ, JAVIER
STREET ADDRESS 2371 SW LAWFORD ST.
CITY- ST- ZIP PORT ST. LUCIE, FL 34953

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE VP ☐ Delete
NAME RODRIGUEZ, LUIS A
STREET ADDRESS 129 NE NARANJA AVE.
CITY- ST- ZIP PORT ST. LUCIE, FL 34983

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE S/T ☐ Delete
NAME NUNEZ, CARLOS
STREET ADDRESS 331 SW MAJESTIC TERRACE
CITY- ST- ZIP PORT ST. LUCIE, FL 34984

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete
NAME
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CITY- ST- ZIP

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TITLE ☐ Delete
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STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

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:

JAVIER MARTINEZ
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President
JAVIER MARTINEZ

04/02/07

4/30/07

561-777-3646
Daytime Phone #

**FIESTA MARIACHI, INC.
12189 US HWY 1 SUITE 31
N. PALM BEACH, FL. 33408**

OCT 2, 2007

DIVISION OF CORPORATIONS
P.O. BOX 1500
TALLAHASSEE, FL. 32302-1500

DEAR SIR/MADAM

WE JUST FOUND OUT THAT OUR CORPORATION HAS BEEN INACTIVATED BECAUSE THE ANNUAL REPORT FOR 2007 WAS SENT BACK WITH A LETTER SAYING THE REPORT WASN'T SIGNED. WE HAVE NO KNOWLEDGE OF RECEIVING THE REPORT BACK AND OUR CHECK #1596 FOR \$150.00 WAS CASHED AT OUR BANK ON MAY 17, 2007.

ENCLOSED PLEASE FIND A COPY OF THE REPORT PROPERLY SIGNED NOW AND A COPY OF OUR BANK STATEMENT WHERE THE CHECK WAS CASHED.

DUE TO THESE CIRCUMSTANCES, WE REQUEST A WAIVER OF THE REINSTATEMENT FEES AND AWAIT THE RE-ACTIVATION OF OUR CORPORATION.

THANK YOU FOR YOUR ASSISTANCE IN THIS MATTER.

SINCERELY,

A handwritten signature in black ink that reads "Javier Martinez". The signature is written in a cursive, flowing style.

JAVIER MARTINEZ
PRESIDENT