

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000089416

Entity Name: EL PALENQUE MEXICANO, INC.

FILED  
Apr 20, 2009  
Secretary of State

## Current Principal Place of Business:

9566 LINGWOOD TRAIL  
ORLANDO, FL 32817 US

## New Principal Place of Business:

## Current Mailing Address:

9566 LINGWOOD TRAIL  
ORLANDO, FL 32817 US

## New Mailing Address:

2331 CELEBRUS DRIVE  
APOPKA, FL 32712 US

FEI Number: 20-5158000

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PROFESSIONAL ACCOUNTANTS & CONSULTANTS, IN  
2471 E SEMORAN BLVD  
APOPKA, FL 32703 US

## Name and Address of New Registered Agent:

TAX CARE INC  
2471 E SEMORAN BLVD  
APOPKA, FL 32703 US

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: TAX CARE INC

04/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: RAMIREZ, JOSE  
Address: 2331 CELEBRUS DRIVE  
City-St-Zip: APOPKA, FL 32703 US

Title: VP ( ) Delete  
Name: RAMIREZ, RUTILIO  
Address: 11121 JOEL CT  
City-St-Zip: ORLANDO, FL 32825 US

Title: TS ( ) Delete  
Name: RAMIREZ, ERIK  
Address: 9566 LINGWOOD TRAIL  
City-St-Zip: ORLANDO, FL 32817 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: RAMIREZ, JOSE  
Address: 2331 CELEBRUS DRIVE  
City-St-Zip: APOPKA, FL 32712 US

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: JOSE RAMIREZ

P

04/20/2009

Electronic Signature of Signing Officer or Director

Date