

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000109396

FILED  
Feb 16, 2008  
Secretary of State

Entity Name: PIPO'S COUSIN RESTAURANT INC

**Current Principal Place of Business:**

4025 W.WATERS AVE  
TAMPA, FL 33614 US

**New Principal Place of Business:**

**Current Mailing Address:**

4025 W.WATERS AVE  
TAMPA, FL 33614 US

**New Mailing Address:**

FEI Number: 20-5414711

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CASTILLO, TONY  
935 MAIN ST  
C-2  
SAFETY HARBOR, FL 34695 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: P ( ) Delete  
Name: FLORES, ARMANDO R  
Address: 31607 SPOONFLOWER CIR  
City-St-Zip: WESLEY CHAPEL, FL 33544 US

Title: VP ( ) Delete  
Name: LEIVA, NEYSA  
Address: 31607 SPOONFLOWER CIR  
City-St-Zip: WESLEY CHAPEL, FL 33544 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: ARMANDO R FLORES

OWNE

02/16/2008

Electronic Signature of Signing Officer or Director

Date