2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000117062

Entity Name: LATIN FOOD RESTAURANT INC

FILED Jul 02, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

2742-2 ELKCAM BOULEVARD 2742-2 ELKCAM BOULEVARD

NELTONIA EL 22720

DELTONA, FL 32738 U

Current Mailing Address: New Mailing Address:

1854 PORTVIEW AVENUE 1854 PORTVIEW AVENUE PRIVATE HOUSE 1854 PORTVIEW AVENUE PRIVATE HOUSE

DELTONA, 32738 DELTONA, FL 32738 US

FEI Number: 83-0464047 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PEREZ, ELIDA MS 1854 PORTVIEW AVENUE PRIVATE HOUSE DELTONA, FL 32738 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:

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 PEREZ, ELIDA MS
 Name:
 PEREZ, ELIDA MS

 Address:
 1854 PORTVIEW AVENUE
 Address:
 1854 PORTVIEW AVENUE

 City-St-Zip:
 DELTONA, FL 32738
 City-St-Zip:
 DELTONA, FL 32738 US

 Name:
 ABREU, SILVIO A MR
 Name:
 ABREU, SILVIO A MR

 Address:
 1854 PORTVIEW AVENUE
 Address:
 1854 PORTVIEW AVENUE

 City-St-Zip:
 DELTONA, FL 32738
 City-St-Zip:
 DELTONA, FL 32738 US

Title: SEC () Delete Title: SEC (X) Change () Addition

 Name:
 ACEVEDO, JULIO E JR
 Name:
 ACEVEDO, JULIO E JR

 Address:
 1854 PORTVIEW AVENUE
 Address:
 1854 PORTVIEW AVENUE

 City-St-Zip:
 DELTONA, FL 32738
 City-St-Zip:
 DELTONA, FL 32738 US

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: ELIDA PEREZ OWN 07/02/2007