## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000134298

FILED Jan 11, 2007 Secretary of State

Entity Name: ANORANZAS RESTAURANT & BAKERY INC **Current Principal Place of Business: New Principal Place of Business:** 1831 NORTH PINE ISLAND ROAD PLANTATION, FL 33322 **Current Mailing Address: New Mailing Address:** 1831 NORTH PINE ISLAND ROAD PLANTATION, FL 33322 FEI Number: 20-8189165 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: GIRON, RALPH 1831 NORTH PINE ISLAND ROAD PLANTATION, FL 33322 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete Title: **PRFS** (X) Change ( ) Addition

Title: GIRON, RALPH Name: Name: GIRON, RALPH 1831 NORTH PINE ISLAND RD 1831 NORTH PINE ISLAND ROAD Address: Address: City-St-Zip: PLANTATION, FL 33322 City-St-Zip: PLANTATION, FL 33322

Title: (X) Delete Title: Name: GONZALEZ, MANUEL Name: 1831 NORTH PINE ISLAND RD Address: Address: PLANTATION, FL 33322 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: RALPH GIRON **PRES** 01/11/2007

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