

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000143420

Entity Name: CORDOBES AR, INC

FILED  
Aug 07, 2007  
Secretary of State

## Current Principal Place of Business:

1701 64TH TERR S.  
LOT 212  
WEST PALM BEACH, FL 33415

## New Principal Place of Business:

2793 C ROAD  
LOXAHATCHEE, FL 33470

## Current Mailing Address:

1701 64TH TERR S.  
LOT 212  
WEST PALM BEACH, FL 33415

## New Mailing Address:

2793 C ROAD  
LOXAHATCHEE, FL 33470

FEI Number: 84-1718373

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

COSMOPOLITAN INSURANCE, INC  
3150 S CONGRESS AVE.  
PALM SPRINGS, FL 33461 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

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:

Title: P ( ) Delete  
Name: TIRABOSCHI, EDUARDO  
Address: 1701 64TH TERR S. LOT # 212  
City-St-Zip: WEST PALM BEACH, FL 33415

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: EDAURDO TIRABOSCHI

P

08/07/2007

Electronic Signature of Signing Officer or Director

Date