2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000068325

Entity Name: FAJITAS SPANISH MEXICAN RESTAURANT, INC.

FILED May 14, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
	DREWS AVE PARK, FL 33						
Current Mailing Address:				New Mailing Address:			
	DREWS AVE PARK, FL 3:						
FEI Number:	68-0651549	FEI Number Applied Fo	or () FEI Nui	mber Not Appli	cable ()	Certificate of Sta	tus Desired ()
Name and	Address of	Current Registered A	gent:	Name and	Address of Ne	ew Registered	Agent:
	FREDY DREWS AVE PARK, FL 3:						
The above in the State		submits this statement	for the purpose of	of changing it	s registered off	ice or registere	ed agent, or both,
SIGNATUF							
		nic Signature of Regist	-			Date	
Election Can		93(2)(b), F.S., the corporating Trust Fund Contribution CTORS:				O OFFICERS	AND DIRECTORS:
Title: Name: Address: City-St-Zip:	P (BONILLA, FRE 220 NW 34 ST OAKLAND PAI	REET		Title: Name: Address: City-St-Zip:	() (Change () Additio	on
Title: Name: Address: City-St-Zip:	PORTILLO, IV 100 NE 12 ST			Title: Name: Address: City-St-Zip:	() (Change () Additio	on
Title: Name: Address: City-St-Zip:	BONILLA, JOS 340 NW 53 CO			Title: Name: Address: City-St-Zip:	() (Change () Additio	on
Title: Name: Address: City-St-Zip:	MENDEZ, RAN 1308 NW 6 AV			Title: Name: Address: City-St-Zip:	S,T (X) MENDEZ, RAMO 461 NW 48 CT OAKLAND PARK		on
Title: Name: Address: City-St-Zip:	VP (BONILLA, ELN 331 N3 44 STI OAKLAND PAI	REET		Title: Name: Address: City-St-Zip:	VP (X) BENITEZ, JUAN 4110 NW 10 TER FORT LAUDERD		non
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	VP () 0 MENDEZ, EDGA 1121 NW 42 CT FORT LAUDERD		on

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: FREDY S BONILLA P 05/14/2009