2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P07000109053



FILED Feb 12, 2008 8:00 am Secretary of State

1. Entity Name RANCHO LATINO PR, INC					02-12-2008 90008 030 ***150.00					
Principal Plac 1557 TURNE KISSIMMEE,	BULL STREET	Mailing Address 1557 TURNBULL STREE KISSIMMEE, FL 34744	1557 TURNBULL STREET		40022971					
2. Principal P 1 55 7 Suite, Apt.	lace of Business - No P.O. Box # Trumbull 5+. #, etc.	3. Mailing Address 1557 True Suite, Apt. #, etc.	nbull st		222008	Chg-P		34 (12/06)		
City & Stat	mmee, FL	City & State		4, 1	FEI Number			_ 	plied For	
Zip 3474	Country	Kissimmee,	FL Country	5.	Certificate o	Status Desired		8.75 Add		
7 17	6. Name and Address of Current F			7. (Name and A	ddress of New Re		ee Require gent		
			Name					•	•	
VILLANUEVA, ISRAEL 1557 TURNBULL STREET KISSIMMEE, FL 34744				Street Address (P.O. Box Number is Not Acceptable)						
			City			A4. 108 1811 I	FL	Zip Code		
	named entity submits this statement for ions of registered agent.	the purpose of changing its r	egistered office of	or registered ag	gent, or both	in the State of Flor		amiliar with,	and accept	
SIGNATURE_	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE:	Registered Agent signs	ture required when r	einstating)		DATE			
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.0	9. Election Campaig Trust Fund Contri		\$5.00 N Added to						
10.	OFFICERS AND D	DIRECTORS	11.	AD	DITIONS/C	HANGES TO OFFI	CERS AND	DIRECTORS	3 JN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT VILLANUEVA, ISRAEL 1557 TURNBULL STREET KISSIMMEE, FL 34744	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT Villand 1557 Ti	rumbi	srael 111 St. 5L 34744		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVPS VILLANUEVA, CARMEN 1557 TURNBULL STREET KISSIMMEE. FL 34744	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVPS villanu 1557 Ti	iera, (rum bu	'ARMEN		☆ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	THOOMINE, I E OVIV	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	713314	MMEE	Y L 34 14		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	☐ Addition	
12. I hereby of indicated	ertify that the information supplied with	this filing does not qualify for	the exemptions	contained in Ch	napter 119, I	Florida Statutes, I 1	further certif	ly that the in	formation	

indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the preceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Q.	G	N	٧.	TI	16	>	=	
J	U	14	~	1 4	JI	`	ᆫ	•

Comen Villanusce (ARmen Villanueva SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR