## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000044444

Address:

City-St-Zip:

8507 FRANJO ROAD

MIAMI, FL 33189

tity Name: TACO RICO RESTAURANTS OF FLORIDA V. INC

FILED Jan 27, 2009 Secretary of State

Entity Nan	ne: TACORIC	O RESTAURANTS OF FLOR	IDA V, INC.		
Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
12271 S DIXIE HIGHWAY PINECREST, FL 33156				12275 S DIXIE HIGHWAY PINECREST, FL 33156	
Current M	ailing Address	::	New Mailing Addre	New Mailing Address:	
12271 S DIXIE HIGHWAY PINECREST, FL 33156				12275 S DIXIE HIGHWAY PINECREST, FL 33156	
FEI Number:	26-2549640	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
NEAL, LELAND 12271 S DIXIE HIGHWAY PINECREST, FL 33156 US				NEAL, LELAND 12275 S DIXIE HIGHWAY PINECREST, FL 33156 US	
The above in the State		ubmits this statement for the p	urpose of changing its registe	red office or registered agent, or both,	
SIGNATURE: LELAND NEAL				01/27/2009	
	Electroni	Signature of Registered Age	nt	Date	
Election Can	npaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP ( ) I LEVRANT, HOW 7945 SW 125 ST PINECREST, FL	REET	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () ROSS, JAMES 14370 SW 98 TE MIAMI, FL 3318		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	S ()I	Delete	Title: Name:	( ) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: LELAND NEAL S 01/27/2009