

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000074334

FILED  
Sep 19, 2010  
Secretary of State

**Entity Name:** LAS AMERICAS BAKERY & RESTAURANT INC

**Current Principal Place of Business:**

6299 W SUNRISE BLVD  
SUITE 104  
PLANTATION, FL 33313

**New Principal Place of Business:**

**Current Mailing Address:**

6299 W SUNRISE BLVD  
SUITE 104  
PLANTATION, FL 33313

**New Mailing Address:**

**FEI Number:** 27-0901181

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROBLEDO, PILAR C  
6299 W SUNRISE BLVD  
104  
PLANTATION, FL 33313 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: OCHOA, LUIS E  
Address: 6299 W SUNRISE BLVD STE 104  
City-St-Zip: PLANTATION, FL 33313

Title: D  
Name: ROBLEDO, PILAR C  
Address: 6299 W SUNRISE BLVD STE 104  
City-St-Zip: PLANTATION, FL 33313

Title: D  
Name: OCHOA ROBLEDO, LUIS F  
Address: 6299 W SUNRISE BLVD STE 104  
City-St-Zip: PLANTATION, FL 33313

Title: D  
Name: FERNANDEZ LOPEZ, ISABEL C  
Address: 6299 W SUNRISE BLVD STE 104  
City-St-Zip: PLANTATION, FL 33313

I hereby 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 all other like empowered.

SIGNATURE: LUIS E OCHOA

D

09/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date