

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000057406

Entity Name: FLAMINGO KITCHEN CORP

**FILED**  
**Mar 16, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3739 CEDAR HAMMOCK TRAIL  
ST CLOUD, FL 34772

**New Principal Place of Business:**

5355 SEDONA CREEK CT  
KISSIMMEE, FL 34758

**Current Mailing Address:**

3739 CEDAR HAMMOCK TRAIL  
ST CLOUD, FL 34772

**New Mailing Address:**

5355 SEDONA CREEK CT  
KISSIMMEE, FL 34758

FEI Number: 27-3042017

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALCALDE, HECTOR  
3739 CEDAR HAMMOCK TRAIL  
ST CLOUD, FL 34772 US

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

ALCALDE, HECTOR  
5355 SEDONA CREEK CT  
KISSIMMEE, FL 34758 US

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: HECTOR ALCALDE

03/16/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ALCALDE, HECTOR  
Address: 5355 SEDONA CREEK CT  
City-St-Zip: KISSIMMEE, FL 34758

Title: VP  
Name: ALCALDE, MARIA  
Address: 5355 SEDONA CREEK CT  
City-St-Zip: KISSIMMEE, FL 34758

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: HECTOR ALCALDE

P

03/16/2011

Electronic Signature of Signing Officer or Director

Date