

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 29, 1999 8:00 am
Secretary of State

06-29-1999 90008 025 ***550.00

DOCUMENT # P93000053630

1. Corporation Name
EL TACO CALIENTE, INC.

Principal Place of Business
4062 123RD TRAIL N
ROYAL PALM BEACH FL 33411

Mailing Address
4062 123RD TRAIL N
ROYAL PALM BEACH FL 33411



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	4. FEI Number	Applied For
21	26	07/30/1993	65-0424190	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
22	27			
City & State	City & State	6. Election Campaign Financing	\$5.00 May Be Added to Fees	
23	28	Trust Fund Contribution		
Zip	Zip	8. This corporation owes the current year Intangible		
24	29	Personal Property Tax.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Country	Country			
25	30			

9. Name and Address of Current Registered Agent

RODRIGUEZ, MELINDA
4062 123RD TRAIL N
ROYAL PALM BEACH FL 33411

10. Name and Address of New Registered Agent

81 Name	EVELINA SAUCEDA
82 Street Address (P.O. Box Number is Not Acceptable)	325 N.W. 18TH CT.
83	
84 City	POMPAHO BEACH FL
85 Zip Code	33060

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Evelina Saucedo (NOTE: Registered Agent signature required when reinstating) DATE 6/18/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D DELETE	1.1 TITLE	PRE <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RODRIGUEZ, MELINDA	1.2 NAME	ABEL VACQUEZ
STREET ADDRESS	4062 123RD TRAIL N	1.3 STREET ADDRESS	4195 OREECHOGA BLVD
CITY-ST-ZIP	ROYAL PALM BEACH FL 33411	1.4 CITY-ST-ZIP	W. PALM BEACH, FL 33409
TITLE	D DELETE	2.1 TITLE	PRE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RODRIGUEZ, JOSE L	2.2 NAME	EVELINA SAUCEDA
STREET ADDRESS	4062-123RD TRAIL N	2.3 STREET ADDRESS	325 N.W. 18TH CT.
CITY-ST-ZIP	ROYAL PALM BEACH FL 33411	2.4 CITY-ST-ZIP	POMPAHO BEACH, FL 33060
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	V-PRE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	RUBEN A. SAUCEDA
STREET ADDRESS		3.3 STREET ADDRESS	325 N.W. 18TH CT.
CITY-ST-ZIP		3.4 CITY-ST-ZIP	POMPAHO BEACH, FL 33060
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

4. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE Evelina Saucedo SIGNATURE REQUIRED EVELINA SAUCEDA DATE 6/18/99 DAYTIME PHONE # 778-8717

CR2E034 (11/98)