

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000081892

**FILED**  
**Mar 12, 2011**  
**Secretary of State**

**Entity Name:** SABOR LATINO RESTAURANT CORP.

**Current Principal Place of Business:**

1199 NW 42 AVENUE  
MIAMI, FL 33126

**New Principal Place of Business:**

**Current Mailing Address:**

704 SW 17TH AVE  
SUITE 3  
MIAMI, FL 33135

**New Mailing Address:**

**FEI Number:** 65-0545723      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

RUIZ, NICOLAS H  
2740 SW 99 AVE  
MIAMI, FL 33165      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:** DP  
**Name:** RUIZ, NICOLAS H  
**Address:** 2740 SW 99 AVE  
**City-St-Zip:** MIAMI, FL 33165

**Title:** DST  
**Name:** RUIZ, FACTO  
**Address:** 14281 SW 8 TERRACE  
**City-St-Zip:** MIAMI, FL 33184

**Title:** V  
**Name:** MARAZZI, NORMA E  
**Address:** 1850 SW 30 AVE.  
**City-St-Zip:** MIAMI, FL 33145

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:** NICOLAS H RUIZ

DP

03/12/2011

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

\_\_\_\_\_  
Date