

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 08, 2001 8:00 am
Secretary of State

0077872

DOCUMENT # P96000052579

03-08-2001 90090 033 ***150.00

1. Entity Name

EL BOHIO RESTAURANT, INC.

Principal Place of Business

Mailing Address

4651 BABCOCK STREET UNIT #14
 PALM BAY FL 32905

4851 BABCOCK STREET UNIT #14
 PALM BAY FL 32905

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3387438

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WALDRON, TOM D ESQ
121 EAST HIBISCUS BOULEVARD
MELBOURNE FL 32901

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
	TD	GABRIEL, AGUILAR	2559 FULTON CT MELBOURNE FL 32935	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	SD	DAMARIS, AGUILAR	2559 FULTON CT MELBOURNE FL 32935	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	PD	AGUILAR, GABRIEL	2559 FULTON COURT MELBOURNE FL 32935	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	TD	AGUILAR, DAMARIS	2559 FULTON COURT MELBOURNE FL 32935	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Tom Waldron* **SD** 1/5/01 6766500
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)