2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000080787

Entity Name: EL POLLO INKA INC.

FILED Apr 07, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7285 NW 36TH ST. MIAMI, FL 33166

Current Mailing Address: New Mailing Address:

7285 NW 36TH ST. MIAMI, FL 33166

FEI Number: 65-0698928 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

CESPEDES, DANIEL D CESPEDES, DANIEL D P 5640 NW 115TH COURT #203 5640 NW 115TH COURT DORAL, FL 33178 US 203 DORAL, FL 33178 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: DANIEL D. CESPEDES 04/07/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete

Title: PD (X) Change () Addition

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 CESPEDES, DANIEL D
 Name:
 CESPEDES, DANIEL D P

 Address:
 5640 NW 114TH COURT 203
 Address:
 5640 NW 115TH COURT # 203

City-St-Zip: MIAMI, FL 33178 City-St-Zip: DORAL, FL 33178 US

Title: D () Delete Title: VP (X) Change () Addition Name: TITINGER, FELISA Name: JAIME, SALOMON VP

 Name:
 THINGER, FELISA
 Name:
 JAIME, SALOMON VE

 Address:
 5640 NW 115TH COURT 203
 Address:
 45 SANTA CRUZ

 City-St-Zip:
 MIAMI, FL 33178
 City-St-Zip:
 R.H.S., CA 90274 US

Title: D () Delete Title: D (X) Change () Addition

 Name:
 VERNE, CARLOS
 Name:
 TITINGER, FELISA D

 Address:
 5640 NW 115TH COURT 203
 Address:
 5640 NW 115TH COURT # 203

City-St-Zip: MIAMI, FL 33178 City-St-Zip: DORAL, FL 33178 US

Title: () Delete Title: S () Change (X) Addition

 Name:
 Name:
 JAIME, ROSA A S

 Address:
 Address:
 45 SANTA CRUZ

 City-St-Zip:
 City-St-Zip:
 R.H.S., CA 90274 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DANIEL D. CESPEDES P 04/07/2009