



**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P97000066730		
1. Entity Name EL SOL LATINO, INC.		
Principal Place of Business 5706 15TH STREET EAST BRADENTON, FL 34203		Mailing Address 5706 15TH STREET EAST BRADENTON, FL 34203
DO NOT WRITE IN THIS SPACE		
		
04132004 No Chg-P CR2E034 (10/03)		
4. FEI Number 65-0772039		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		
WOMELDORPH, HOWARD R 7648 LOCKWOOD RIDGE RD SARASOTA, FL 34243		DO NOT WRITE IN THIS SPACE
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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
		U000000152134 05/04/04-80074-010 150.00
10. OFFICERS AND DIRECTORS		
TITLE	D	
NAME	ALVAREZ, AURELIO S	
STREET ADDRESS	5706 15TH STREET EAST	
CITY-ST-ZIP	BRADENTON, FL 34203	
TITLE	D	
NAME	REYES, KARLA	
STREET ADDRESS	3712 17 ST CT E	
CITY-ST-ZIP	BRADENTON, FL 34208	
TITLE	D	
NAME	PAGAN, MARIA C	
STREET ADDRESS	507 19TH AVE W	
CITY-ST-ZIP	BRADENTON, FL 34205	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Aurelio Salgado</u> Aurelio Salgado 04-23-04		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #		