2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 27, 2006 08:00 AM Secretary of State

DOCUMENT # P9800000556 1. Entity Name ISLA DORADA RESTAURANT INC.				Secretary of State
Principal Place 48 E FLAGLI #35 MIAMI, FL 3	ER ST	Mailing Address 1710 SW 35 CT MIAMI, FL 33145		S PRESINENT (SE SEINE ARTIK REVII) REVII REVII REVII REVIX REVIZ RIVEL RIVE BIVIZZO II IRRZ
JARQUIN	6. Name and Address of Current Reg. YOLANDA ST FLAGLER STREET, C-310		CE	04192006 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For S5-0806467 Not Applied For Not Applied For Status Desired \$8.75 Additional Fee Required 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. Fam familiar with, a the obligations of registered agent.				
SIGNATURE Yell D A Y 25/06 Signature, types or fir nied name of redistand agent and into it epobloable. (NOTE Registered Agent signature required when reinstating) V/25/06 DATE				
After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution.				00 May Be ed to Fees (10000053F874
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND BIRE PSTD JARQUIN, YOLANDA 48 E FLAGLER ST MIAMI, FL 33131	ECTORS -		05708708-3011Q-013 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME				DO NOT WRITE IN THIS SPACE
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12. I hereby condicated of the corr	ertify that the information supplied with this on this report or supplemental report is true poration or the receiver or trustee emonwhere	filling does not qualify for the ext and accurate and that my signal	emptions contained ture shall have the s	in Chapter 119, Florida Statutes. I further certify that the information name legal effect as if made under oath; that I am an officer or director. Florida Statutes: and that my name appears in Block 10 or Block 11 if