

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000053783

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** LOZANO'S RESTAURANT & SPORTS BAR, INC.

**Current Principal Place of Business:**

405 NEW MARKET ROAD  
IMMOKALEE, FL 34143

**New Principal Place of Business:**

405 NEW MARKET ROAD  
IMMOKALEE, FL 34142

**Current Mailing Address:**

405 NEW MARKET ROAD EAST  
P.O. BOX 961  
IMMOKALEE, FL 34143

**New Mailing Address:**

P.O. BOX 961  
IMMOKALEE, FL 34143

**FEI Number:** 59-3553598

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GONZALEZ, CYNTHIA  
405 NEW MARKET ROAD EAST  
IMMOKALEE, FL 34143 US

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

GONZALEZ, CYNTHIA  
405 NEW MARKET ROAD EAST  
IMMOKALEE, FL 34142 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: CYNTHIA GONZALEZ

05/01/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: GONZALEZ, CYNTHIA  
Address: 405 NEW MARKET ROAD EAST  
City-St-Zip: IMMOKALEE, FL 34142

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: CYNTHIA GONZALEZ

PRES

05/01/2012

Electronic Signature of Signing Officer or Director

Date