

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006 8:00 am
Secretary of State

04-27-2006 90201 033 ***150.00

DOCUMENT # P98000061337			
1. Entity Name EL TORO MEXICAN FOOD & CANTINA, INC.			
Principal Place of Business 1602 SE FEDERAL HWY STUART, FL 34994		Mailing Address 626 ROSSMOOR CIRCLE MELBOURNE, FL 32940	
2. Principal Place of Business		3. Mailing Address 1602 SE FEDERAL HWY	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State STUART, FL	
Zip	Country	Zip	Country
		34994	U.S.
5. Name and Address of Current Registered Agent BOUVIER, PAUL 3210 N WICKHAM RD SUITE 5 MELBOURNE, FL 32935		7. Name and Address of New Registered Agent Name HERIBERTO A. MARTINEZ Street Address (P.O. Box Number is Not Acceptable) 1602 SE FEDERAL HWY City STUART FL Zip Code 34994	
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 <i>Heriberto A. Martinez</i>		DATE 04/25/06	
FILE NOW!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MARTINEZ, NESTOR 1841 SWEETWOOD DR MELBOURNE, FL 32935 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JESSEMAN, WILLIAM 626 ROSSMOOR CIR MELBOURNE, FL 32940 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	VP HERIBERTO A. MARTINEZ 1225 DRILL AVE. N.E PALM BAY, FL. 32907	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 duly empowered.			
SIGNATURE <i>Heriberto A. Martinez</i>		DATE 04/25/06 772-287-8161	
SIGNATURE AND TYPED OR PRINTED NAME OF BRANCH OFFICER OR DIRECTOR		DATE	

40067192



04202006 Chg-P CR2E034 (11/05)

4. FEI Number **65-0853751** Applied For ☐ Not Applicable ☐8. Certificate of Status Desired ☐ \$8.75 Additional Fee Required