

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000086284

1. Entity Name
MEXICAN GRILL, INC.



Principal Place of Business
**2370 BAHIA VISTA
SARASOTA, FL 34239**

Mailing Address
**2370 BAHIA VISTA
SARASOTA, FL 34239**



04262004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0876009

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

5. Name and Address of Current Registered Agent

**ARREGUIN, ELISEO
2370 BAHIA VISTA
SARASOTA, FL 34239**

**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

Signature, typed or printed name of registered agent and title if applicable.

(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. ☐

**\$5.00 May Be
Added to Fees**

U00000153355

05/04/04-80124-007 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ARREGUIN, ELISEO
STREET ADDRESS	2370 BAHIA VISTA
CITY - ST - ZIP	SARASOTA, FL 34239
TITLE	D
NAME	ARREGUIN, LUZ M
STREET ADDRESS	2370 BAHIA VISTA
CITY - ST - ZIP	SARASOTA, FL 34239
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

Luz M. Arreguin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-2004

Date

Daytime Phone #