


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 26, 2006 08:00 AM
Secretary of State

DOCUMENT # P99000053007 1. Entity Name EL MERCADITO OF LAKE PLACID, INC.	
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Principal Place of Business 910 US HWY.27 SOUTH LAKE PLACID, FL 33852	Mailing Address 910 US HWY.27 SOUTH LAKE PLACID, FL 33852
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U00000566158
05/26/06-80001-006 150.00



DO NOT WRITE IN THIS SPACE

02172006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0903011	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fees Required
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6. Name and Address of Current Registered Agent

**HERNANDEZ, VICENTE C
910 US HWY.27 SOUTH
LAKE PLACID, FL 33852**

**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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERNANDEZ, VICENTE C 910 US HWY.27 SOUTH LAKE PLACID, FL 33852
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARCIA-OLIVAREZ, LEOBARDO 910 US HWY 27 SOUTH LAKE PLACID, FL 33852
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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 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 like empowered.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/24/06

Date

Daytime Phone #