

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P06000152608

**Entity Name:** EL CUBANITO DOMINO, INC.

**Current Principal Place of Business:**

9500 NW 79 AVE.  
SUITE 3  
HIALEAH GARDENS, FL 33016

**Current Mailing Address:**

9500 NW 79 AVE.  
SUITE 3  
HIALEAH GARDENS, FL 33016 US

**FEI Number:** 56-2628483

**Certificate of Status Desired:** No

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

BELLO, SHIRLEY  
7396 W 18 AVE  
HIALEAH, FL 33014 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title P/D  
Name BELLO, SHIRLEY  
Address 7396 W 18 AVE  
City-State-Zip: HIALEAH FL 33014

Title P/D  
Name BELLO, SHIRLEY BELLO  
Address 7396 W 18 AVE  
City-State-Zip: HIALEAH FL 33014

Title VP/T  
Name BELLO, MARIO O  
Address 7396 W 18 AVE  
City-State-Zip: HIALEAH FL 33014

Title P/D  
Name BELLO, SHIRLEY  
Address 9500 NW 79 AVE STE 3  
City-State-Zip: HIALEAH GARDENS FL 33016

Title P/D  
Name BELLO, SHIRLEY  
Address 9500 NW 79 AVE STE 3  
City-State-Zip: HIALEAH GARDENS FL 33016

Title P/D  
Name BELLO, SHIRLEY  
Address 9500 NW 79 AVE STE 3  
City-State-Zip: HIALEAH GARDENS FL 33016

*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:** SHIRLEY BELLO

**PRESIDENT**

**04/21/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date