

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000024766

Entity Name: EL BODEGON GROCERY INC.**Current Principal Place of Business:**4704 FOREST HILL BLVD
WEST PALM BEACH, FL 33415**Current Mailing Address:**% MARIO G. DE MENDOZA, III, P.A.
12765 FOREST HILL BLVD., SUITE 1302
WELLINGTON, FL 33414 US**FEI Number:** 65-0821854**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MARIO G. DE MENDOZA, III, P.A.
12765 FOREST HILL BLVD., SUITE 1302
WELLINGTON, FL 33414 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	DP
Name	ORTIZ, CARLOS M
Address	4704 FOREST HILL BLVD.
City-State-Zip:	WEST PALM BEACH FL 33415

Title	DST
Name	RINCON, GUILLERMO A
Address	4704 FOREST HILL BLVD
City-State-Zip:	WEST PALM BEACH FL 33415

Title	VP
Name	RINCON, JUAN FELIPE
Address	4704 FOREST HILL BOULEVARD
City-State-Zip:	WEST PALM BEACH FL 33415

Title	DV
Name	RINCON, GLORIA P
Address	4704 FOREST HILL BLVD
City-State-Zip:	WEST PALM BEACH FL 33415

Title	VP
Name	ORTIZ, ANDREW
Address	4704 FOREST HILL BOULEVARD
City-State-Zip:	WEST PALM BEACH FL 33415

Title	VP
Name	RINCON ESTRADA, JUAN DAVID
Address	4704 FOREST HILL BOULEVARD
City-State-Zip:	WEST PALM BEACH FL 33415

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: CARLOS M. ORTIZ**PRESIDENT****01/02/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date