

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000332481

Entity Name: SAN JOSE'S ORIGINAL MEXICAN RESTAURANT OF WINDERMERE, LLC**Current Principal Place of Business:**11620 LAKESIDE VILLAGE LANE
130-140
WINDERMERE, FL 34786**Current Mailing Address:**11620 LAKESIDE VILLAGE LANE
130-140
WINDERMERE, FL 34786 US**FEI Number:** 88-3679216**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SAN JOSE'S ENTERPRISES LLC
940 W OAKLAND AVE
SUITE A9
OAKLAND, FL 34787 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:** ZENOVIO SALGADO

04/29/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name SALGADO, ZENOVIO
Address 940 W OAKLAND AVE
SUITE A9
City-State-Zip: OAKLAND FL 34787

Title AMBR
Name SALGADO, ARMANDO
Address 940 W OAKLAND AVE
STE A9
City-State-Zip: OAKLAND FL 34787

Title AMBR
Name HERNANDEZ-ROJO, ELVIA
Address 1040 LINCOLN TER
City-State-Zip: WINTER GARDEN FL 34787

Title AMBR
Name HERNANDEZ-ROJO, MERICIA
Address 1040 LINCOLN TER
City-State-Zip: WINTER GARDEN FL 34787

Title AMBR
Name HERNANDEZ-ROJO, VICTORIA
Address 529 WOODSON AVE
City-State-Zip: OCOEE FL 34761

Title AUTHORIZED MEMBER
Name PADILLA, YOLANY M
Address 16153 YELLOWEYED DR
City-State-Zip: CLERMONT FL 34714

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ZENOVIO SALGADO

MEMBER

04/29/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date