

provision of the Labor Code.

STATE OF CALIFORNIA

CORPORATION

1500 11th Street

California Secretary of State

Sacramento, California 95814

Office of the Secretary of State

STATEMENT OF INFORMATION

BA20241727119

DA20241727

For Office Use Only



File No.: BA20241727119 Date Filed: 9/27/2024

| (916) 657- | -5448 | 3 | | | |
|---|--------|--|---|--------------------------|---|
| Entity Details | | | | | |
| Corporation Name | | | CHIL | A-KI-LES INC | |
| Entity No. | | | 6402159 | | |
| Formed In | | | CALIFORNIA | | |
| Street Address of Principal Office of | Corpo | ration | | | |
| Principal Address | | | 22171 US HIGHWAY 18 APPLE VALLEY, CA 92307 | | |
| Mailing Address of Corporation | | | | , _, _, _, _, | |
| Mailing Address | | | 2217 | 1 US HIGHWAY 18 | |
| J | | | APP | LE VALLEY, CA 92307 | 7 |
| Attention | | | | | |
| Street Address of California Office of | | | | | |
| Street Address of California Office | | | 22171 US HIGHWAY 18 APPLE VALLEY, CA 92307 | | |
| Officers | | | 7.1.1 | | |
| Officer Name | | Officer Address | | D | osition(s) |
| | | | Chief Financial Officer, Chief Executive Officer, Secretary | | |
| + LESLIE J TORRES | | 71 US HIGHWAY 18 PLE VALLEY, CA 92307 | Chief | Financial Officer, Chief | Executive Officer, Secretary |
| Additional Officers | | | | | |
| Officer Name | | Officer Address | | Position | Stated Position |
| | | None | Entere | d | |
| | | | | | |
| Directors | | | 1 | | |
| Di | rector | Name | Director Address | | |
| + LESLIE J TORRES | | | 22171 US HIGHWAY 18 APPLE VALLEY, CA 92307 | | |
| The number of vacancies o | n Bo | ard of Directors is: 0 | / | | |
| | | | | | |
| Agent for Service of Process | | | | LIE J TORRES | |
| Agent Name | | | 22171 US HIGHWAY 18 | | |
| Agent Address | | | | LE VALLEY, CA 92307 | 7 |
| Type of Business | | | | | |
| Type of Business | | | FAS | T FOOD MEXICAN RE | ESTAURANT |
| Email Notifications Opt-in Email Notifications | | | Yes, | I opt-in to receive enti | ty notifications via email. |
| | | orporation has an outstandin for which no appeal therefro | | | he Division of Labor Standards on of any wage order or |

| lectronic Signature | |
|---|--|
| By signing, I affirm that the information | n herein is true and correct and that I am authorized by California law to sign. |
| | |
| | |
| I ESI IE I TODDES | 00/27/2021 |
| LESLIE J TORRES Signature | 09/27/2024 Date |