FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Morthann

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

266918

(2)

PUERTO SAGUA RESTAURANT CORP

Principal Place	of Rusiness	Mailing	Address							
Principal Place of Business Mailing Address 700 COLLINS AVENUE 700 COLLINS AVENUE				ır						
			FL 33139-6216							
			·····				3. Date Incorporated or Qualified 02/07/1963	1	of Last F 3/01/19	•
2. Principal Pla	ace of Business	n	ng Address				4. FET Number	,		Applied For
Suite, Apt. #		26 Suite	e, Apt. #, etc.		-		59-0994763		60.7	Not Applicable
2	,,	27	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				5. Cert-ficate of Status Desired			5 Additional Required
City & State		City	& State				6. Election Campaign Financing		\$5.0	00 May Be
3		28					Trust Fund Contribution	L.J		ed to Fees
Zip M	Country	Zip		Cou	intry		8. This corporation has liability or		x under s	3 199.032,
4	9. Name and Address of Curre	29 nt Registered	Agent	30	ŗ		Florida Statutes Yes 10. Name and Address of New F	□ No	A =====	
	<u> </u>		- Agoin		81	Name	To, maine and Address of New P	registered .	- gent	
HORACIO, RIVERO					82					
19900 E OAKMONT DR						Street Add	ess (P.O. Box Number is Not Acceptable)			
MIAMI, F										
					84	Gity			Ter 2	in Codo
						′	pration submits this statement for the pu	FL		(ip Code
SIGNATURE	h, and accept the obligations of, Sec Stynature typed or printed hance of registered agra-	stion 607.0505,	r Iorida Statute	ts.			ard of directors. I hereby accept the app	ťΑŒ		
12.	OFFICERS AN	ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTO	ORS IN 12
TILE	PD		DELETE	1. 1 T	ITLE			[] Change	Add-tion
NAME	RIVERO, JAVIER			12 N	3MA					
STREET ADDRESS	7520 COQUINA DR			13.\$1	TREE I	ADDRESS				
CITY-ST-ZIP TITLE	MIAMI BCH, FL 00000	-	DELETE			T ZIF		· ···	7.05	
NAME	TD Rivero, Evaristo		C) percer	2 1 Ti				L] Change	☐ Add₁tion
STREET ADDRESS	7520 COQUINA DR					ADDRESS				
CITY-S1-ZIP	MIAMI BCH, FL 00000			240						
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NAME	HORACIO, RIVERO			32 N/	AME			_	-	_
STREET ADDRESS	19900 E OAKMONT DR			3.3 S	TREE 1	ADDRESS				
CITY+ST-7IP	COUNTRY CLUB, MIAMIOOO	00		3.4 CI	IY-S	1 - 71F				
1IILE			☐ DELETE	4 1 7	TLF] Change	☐ Addition
NAME				42 M	SMA					
STREET ADDRESS						ADDRESS				
CITY+ST-ZIP TITLE			DELETE	4.4 CF 5.1 TI		I - 7IP			7 65	- Im Augusta
NAME			Douter	5.2 NA				L	Change	Addition
STREET ADDRESS						ADORESS				
CITY-ST-ZIP				5 4 CI		1				
TITLE			□ D€LETE	6 1 TI					7 Change	Addition
NAME				6.2 NA	ME			_	J J -	G
57REET ADORESS						ADDRESS.				
CITY - S1 - ZIP				6 4 C)						
certify that oath; that I	the information indicated on this ann	ual report or su oration or the re	ipplemental anr sceiver or truste	nua' report is ee empower	s tru	o and accrea	for the exemption stated in Section 119, ate and that my signature shall have the his report as recovered by Chapter 607, Fir	como tripal i	affact ac i	if mada undar

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EVARISTO RIVETLO 2

2-7-96 (303) 673-1/15